

FORM
5Rev
10/14**State of Colorado**
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402215625

Date Received:

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10311

Contact Name: Christi Ng

Name of Operator: SRC ENERGY INC

Phone: (720) 616.4300

Address: 1675 BROADWAY SUITE 2600

Fax: (720) 616.4301

City: DENVER

State: CO

Zip: 80202

Email: cng@srcenergy.com

API Number 05-123-47665-00

County: WELD

Well Name: Bost Farm

Well Number: 31N-11B-L

Location: QtrQtr: SWNW Section: 7 Township: 5N Range: 66W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 1415 feet Direction: FNL Distance: 1120 feet Direction: FWL

As Drilled Latitude: 40.417643 As Drilled Longitude: -104.828366

GPS Data:

Date of Measurement: 03/08/2019 PDOP Reading: 1.5 GPS Instrument Operator's Name: Ian Carabajal
FNL/FSL FEL/FWL** If directional footage at Top of Prod. Zone Dist: 1329 feet Direction: FNL Dist: 159 feet Direction: FEL
Sec: 12 Twp: 5N Rng: 67W** If directional footage at Bottom Hole Dist: 1410 feet Direction: FNL Dist: 388 feet Direction: FWL
Sec: 11 Twp: 5N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/10/2019 Date TD: 06/29/2019 Date Casing Set or D&A: 06/30/2019

Rig Release Date: 08/24/2019 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 17097 TVD** 6949 Plug Back Total Depth MD 16976 TVD** 6950

Elevations GR 4880 KB 4900

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

MWD/LWD, CBL, MUD, (Resistivity/GR in API: 05-123-47691)

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	55	0	40	38	0	40	VISU
SURF	13+1/2	9+5/8	36	0	1,799	715	0	1,799	VISU
1ST	8+1/2	5+1/2	20	0	17,062	2,251	0	17,062	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,665		NO	NO	
SUSSEX	4,367		NO	NO	
SHANNON	4,772		NO	NO	
NIOBRARA	7,000		NO	NO	

Operator Comments:

Top of productive zone footages are estimated and based on the top possible legal perforation point within the unit. The estimated date of completion of the pad is 1st quarter 2020. The actual top of productive zone footages will be provided in the comments on the Form 5A when the well has been completed. The BHL footages are from the "Projection to Bit" numbers listed on the first page of the directional survey.

An open hole resistivity log was not ran on this well. Open hole resistivity log with gamma ray ran on Bost Farm 26C-8-L (API: 05-123 -47691), which shares the same pad.

Sharon Springs formation top is not present in vertical section wellbore due to fault.

Surface and production casing setting depths on Surface Cement Job Summary and Production Cement Job Summary are incorrect. Reported depths on casing tab, 1799' is the accurate surface csg setting depth and 17062' is the accurate production csg setting depth. 6 bbl wet shoe.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Christi NgTitle: Sr. Regulatory Analyst

Date: _____

Email: cng@srcenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402215682	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402215656	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
402215634	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402215638	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402215652	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402215653	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402215657	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402219660	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402219661	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

