

**FORM**  
**5**  
Rev  
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:  
402171383  
  
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: 8960 Contact Name: Kate Miller  
 Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (720) 4406116  
 Address: 410 17TH STREET SUITE #1400 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202 Email: regulatory@bonanzacr.com

API Number 05-123-49898-00 County: WELD  
 Well Name: Latham Well Number: K21-O24-14HNB  
 Location: QtrQtr: NENE Section: 14 Township: 4N Range: 63W Meridian: 6  
 FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 Footage at surface: Distance: 302 feet Direction: FNL Distance: 332 feet Direction: FEL  
 As Drilled Latitude: 40.319170 As Drilled Longitude: -104.397060  
 GPS Data:  
 Date of Measurement: 05/16/2019 PDOP Reading: 1.7 GPS Instrument Operator's Name: Casey Kohout  
 FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 \*\* If directional footage at Top of Prod. Zone Dist: 260 feet Direction: FNL Dist: 2311 feet Direction: FWL  
 Sec: 14 Twp: 4N Rng: 63W  
 FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 \*\* If directional footage at Bottom Hole Dist: 475 feet Direction: FSL Dist: 2284 feet Direction: FWL  
 Sec: 14 Twp: 4N Rng: 63W  
 Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 06/07/2019 Date TD: 06/19/2019 Date Casing Set or D&A: 06/21/2019  
 Rig Release Date: 09/03/2019 Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 11896 TVD\*\* 6318 Plug Back Total Depth MD 11863 TVD\*\* 6318  
 Elevations GR 4604 KB 4621 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:  
CBL, MWD/LWD, (Resistivity 123-49901)

**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
SURF	13+1/2	9+5/8	36	0	1,610	515	0	1,610	VISU
1ST	8+1/2	5+1/2	20	0	11,886	1,750	510	11,896	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	3,530				
SHARON SPRINGS	6,792				
NIOBRARA	7,059				

Operator Comments:

TPZ was estimated, actual TPZ will be listed on the Form 5A.

No open-hole logs were ran on this well. A Resistivity log was ran on Latham K-O-14HNC (05-123- 49901). Approved APD had BMP requiring one well on pad to be logged with open hole resistivity log with gamma ray.

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

Signed: \_\_\_\_\_

Print Name: Ashley Noonan

Title: Sr. Regulatory Analyst

Date: \_\_\_\_\_

Email: regulatory@bonanzacrk.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
402185511	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402185886	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"/>
<b>Other Attachments</b>			
402185891	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402189928	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402209791	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402209795	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402227951	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402227973	PDF-CEMENT BOND	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)

