

FORM  
5Rev  
02/20

## 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:

402265300

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: 10110 Contact Name: Eileen Roberts  
 Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (720) 595-2115  
 Address: 1001 17TH STREET #2000 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202 Email: eroberts@gwp.com

 API Number 05-123-46413-00 County: WELD  
 Well Name: Schneider HD Well Number: 11-019HNX  
 Location: QtrQtr: NWSW Section: 7 Township: 4N Range: 66W Meridian: 6  
 FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 Footage at surface: Distance: 1745 feet Direction: FSL Distance: 792 feet Direction: FWL  
 As Drilled Latitude: 40.324002 As Drilled Longitude: -104.826891  
 GPS Data: GPS Quality Value: 1.6 Type of GPS Quality Value: PDOP Date of Measurement: 09/05/2019  
 GPS Instrument Operator's Name: Matthew Miller FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 \*\* If directional footage at Top of Prod. Zone Dist: 70 feet Direction: FNL Dist: 534 feet Direction: FEL  
 Sec: 12 Twp: 4N Rng: 67W FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
 \*\* If directional footage at Bottom Hole Dist: 85 feet Direction: FNL Dist: 243 feet Direction: FWL  
 Sec: 11 Twp: 4N Rng: 67W  
 Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_
Spud Date: (when the 1st bit hit the dirt) 08/28/2019 Date TD: 09/18/2019 Date Casing Set or D&A: 09/20/2019Rig Release Date: 11/24/2019 Per Rule 308A.b.

Well Classification:

 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation
Total Depth MD 18136 TVD\*\* 6926 Plug Back Total Depth MD 18125 TVD\*\* 6926Elevations GR 4735 KB 4755 Digital Copies of ALL Logs must be Attached per Rule 308A 

List Electric Logs Run:

Mud, MWD/LWD, CBL (Composite in 123-46407)

## 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	1,577	720	0	1,577	VISU
1ST	8+1/2	5+1/2	17	0	18,136	2,535	1,020	18,136	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	3,663	3,784	NO	NO	
SUSSEX	4,136	4,389	NO	NO	
SHANNON	4,706	4,768	NO	NO	
SHARON SPRINGS	7,861		NO	NO	
NIOBRARA	8,065		NO	NO	

Operator Comments:

This well was drilled during the second rig occupation on the Schneider Pad.

Alternative logging program: No open-hole logs were run; Open-hole composite log was run on the Schneider HD 11-182HC (123-46407);

Approved APD had BMP requiring one well on pad to be logged with an 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: Eileen Roberts

Title: Regulatory Analyst

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

Email: eroberts@gwp.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
402270624	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402270567	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>			
402270606	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271025	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271026	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271028	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271031	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)

