

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:

402265355

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 05-123-46405-00

County: WELD

Well Name: Schneider HD

Well Number: 11-222HN

Location: QtrQtr: NWSW Section: 7 Township: 4N Range: 66W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 1894 feet Direction: FSL Distance: 981 feet Direction: FWL

As Drilled Latitude: 40.324410 As Drilled Longitude: -104.826221

GPS Data: GPS Quality Value: 1.7 Type of GPS Quality Value: PDOP Date of Measurement: 09/11/2019

GPS Instrument Operator's Name: Matthew Miller

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone Dist: 2373 feet Direction: FSL Dist: 541 feet Direction: FEL  
Sec: 12 Twp: 4N Rng: 67W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole Dist: 2362 feet Direction: FSL Dist: 234 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) 09/10/2019 Date TD: 10/10/2019 Date Casing Set or D&amp;A: 10/12/2019

Rig Release Date: 11/24/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17480 TVD\*\* 6955 Plug Back Total Depth MD 17469 TVD\*\* 6955

Elevations 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	1,609	720	0	1,609	VISU
1ST	8+1/2	5+1/2	17	0	17,480	2,435	1,218	17,480	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	3,652	3,778	NO	NO	
SUSSEX	4,138	4,330	NO	NO	
SHANNON	4,707	4,761	NO	NO	
SHARON SPRINGS	7,064		NO	NO	
NIOBRARA	7,187		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.

The casing shoe on the MWD.pdf log well sketch should be 1609'.

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 ?
<u>Attachment Checklist</u>		
402265545	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402265449	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>		
402265677	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402265685	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402265707	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402265713	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402265741	DIRECTIONAL DATA	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)

