

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:

402169936

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: Miracle Pfister

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Phone: (720) 595-2250

Address: 1001 17TH STREET #2000

Fax:

City: DENVER

State: CO

Zip: 80202

Email: mpfister@gwogco.com

API Number 05-001-10468-00

County: ADAMS

Well Name: Rio LC

Well Number: 12-369HNX

 Location: QtrQtr: NWNW Section: 6 Township: 1S Range: 67W Meridian: 6
 FNL/FSL FEL/FWL

Footage at surface: Distance: 263 feet Direction: FNL Distance: 155 feet Direction: FWL

As Drilled Latitude: 39.999618 As Drilled Longitude: -104.939783

GPS Data: GPS Quality Value: 1.3 Type of GPS Quality Value: Date of Measurement: 07/08/2019

GPS Instrument Operator's Name: Nate Welch

FNL/FSL

FEL/FWL

 ** If directional footage at Top of Prod. Zone Dist: 559 feet Direction: FNL Dist: 2368 feet Direction: FEL
 Sec: 1 Twp: 1S Rng: 68W

FNL/FSL

FEL/FWL

 ** If directional footage at Bottom Hole Dist: 231 feet Direction: FSL Dist: 2387 feet Direction: FEL
 Sec: 12 Twp: 1S Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/07/2019 Date TD: 08/21/2019 Date Casing Set or D&A: 08/22/2019

Rig Release Date: 09/07/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 18102 TVD** 7521 Plug Back Total Depth MD 18092 TVD** 7521

Elevations GR 5068 KB 5088

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

List Electric Logs Run:

CBL, Mud Log, MWD/LWD, (Composite in API# 001-09950)

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	1,779	800	0	1,779	VISU
1ST	8+1/2	5+1/2	17	0	18,102	2,535	3,666	18,102	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	4,576	4,698	NO	NO	
SUSSEX	5,114	5,269	NO	NO	
SHANNON	5,709	5,785	NO	NO	
SHARON SPRINGS	8,066		NO	NO	
NIOBRARA	8,093		NO	NO	

Operator Comments:

Alternative Logging Program - No open-hole logs were run. This log was run in the Rio LC 12-242HC (API # 05-001-09950) in the form of a Composite log.

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

Signed: _____

Print Name: Jack Desmond

Title: Regulatory Analyst

Date: _____

Email: jdesmond@gwogco.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402238289	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402214819	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>			
402214821	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238245	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238287	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238288	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402247061	PDF-MUD	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)

