

FORM  
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Rev  
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:

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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 05-001-10466-00 County: ADAMS  
Well Name: Rio LC Well Number: 12-368HN  
Location: QtrQtr: NWNW Section: 6 Township: 1S Range: 67W Meridian: 6  
FNL/FSL FEL/FWL  
Footage at surface: Distance: 293 feet Direction: FNL Distance: 155 feet Direction: FWL  
As Drilled Latitude: 39.999536 As Drilled Longitude: -104.939781  
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: 573 feet Direction: FNL Dist: 1967 feet Direction: FEL  
Sec: 1 Twp: 1S Rng: 68W FNL/FSL FEL/FWL  
\*\* If directional footage at Bottom Hole Dist: 230 feet Direction: FSL Dist: 1999 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) 07/05/2019 Date TD: 08/31/2019 Date Casing Set or D&A: 09/02/2019  
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 18047 TVD\*\* 7705 Plug Back Total Depth MD 18037 TVD\*\* 7705

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	1,778	800	0	1,778	VISU
1ST	8+1/2	5+1/2	17	0	18,047	2,525	4,136	18,047	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	4,480	4,605	NO	NO	
SUSSEX	5,016	5,174	NO	NO	
SHANNON	5,609	5,672	NO	NO	
SHARON SPRINGS	7,950		NO	NO	
NIOBRARA	7,971		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 ?	
<b>Attachment Checklist</b>			
402238491	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402214840	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>			
402214839	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238431	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238437	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238447	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402238481	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)

