

FORM
5

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:

402241785

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: <u>10071</u>	Contact Name: <u>Bill Ramsey</u>
Name of Operator: <u>HIGHPOINT OPERATING CORPORATION</u>	Phone: <u>(303) 312-8131</u>
Address: <u>555 17TH ST STE 3700</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>bramsey@hpres.com</u>

API Number <u>05-123-49224-00</u>	County: <u>WELD</u>
Well Name: <u>Anschutz Equus Farms</u>	Well Number: <u>5-61-35-6457B</u>
Location: QtrQtr: <u>NESE</u> Section: <u>34</u> Township: <u>5N</u> Range: <u>61W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>1686</u> feet Direction: <u>FSL</u> Distance: <u>375</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.354729</u> As Drilled Longitude: <u>-104.186874</u>	
GPS Data: GPS Quality Value: <u>1.6</u> Type of GPS Quality Value: _____ Date of Measurement: <u>01/18/2019</u>	
GPS Instrument Operator's Name: <u>Chad Meiers</u>	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>490</u> feet Direction: <u>FSL</u> Dist: <u>460</u> feet Direction: <u>FWL</u>	
Sec: <u>35</u> Twp: <u>5N</u> Rng: <u>61W</u>	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>484</u> feet Direction: <u>FSL</u> Dist: <u>399</u> feet Direction: <u>FEL</u>	
Sec: <u>36</u> Twp: <u>5N</u> Rng: <u>61W</u>	
Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>	
Federal, Indian or State Lease Number: _____	

Spud Date: (when the 1st bit hit the dirt) 10/12/2019 Date TD: 10/20/2019 Date Casing Set or D&A: 10/21/2019
Rig Release Date: 10/27/2019 Per Rule 308A.b.

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

Total Depth MD <u>16035</u> TVD** <u>5861</u> Plug Back Total Depth MD <u>16014</u> TVD** <u>5859</u>
Elevations GR <u>4496</u> KB <u>4480</u> Digital Copies of ALL Logs must be Attached per Rule 308A <input type="checkbox"/>

List Electric Logs Run:
MWD/LWD; CBL; (RES in 05-123-48186)

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
CONDUCTOR	20	16	84	0	80				VISU
SURF	13+1/2	9+5/8	36	0	988	388	0	988	VISU
1ST	8+3/4	7	23	0	6,298	290	122	6,298	CBL
2ND	6+1/8	4+1/2	13.5/11.6	0	16,031	830	122	16,031	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	3,230		NO	NO	
SUSSEX	3,853		NO	NO	
SHANNON	4,362		NO	NO	
SHARON SPRINGS	5,812		NO	NO	
NIOBRARA	6,065		NO	NO	

Operator Comments:

Alternative Logging Program - No open-hole logs were run. This log was run in the Anschutz Equus Farms Fed 5-61-34-5764B (API# 05-123-48186) in the form of an Open hole resistivity log with gamma.

Conductor Casing has been added to this well and is reflected on the casing tab.

Surface Cement Job Summary reports the top of the casing shoe at 986'. The actual bottom of the casing is reported at 988'.

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

Signed: _____

Print Name: Bill RamseyTitle: Regulatory Analyst

Date: _____

Email: bramsey@hpres.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402242603	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402245795	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>			
402242600	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402268887	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271338	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402271403	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft - 5/19/2020 -Operator request to make corrections	05/19/2020
Permit	Added GPS comment to the submit tab per operator	02/18/2020

Total: 2 comment(s)

