

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:

402414897

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: 10633 Contact Name: Logan Siple
Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 579-2174
Address: 1801 CALIFORNIA STREET #2500 Fax: _____
City: DENVER State: CO Zip: 80202 Email: logan.siple@crestonepr.com

API Number 05-123-47950-00 County: WELD
Well Name: Dream Weaver South Well Number: 3D-21H-N268
Location: QtrQtr: SESW Section: 21 Township: 2N Range: 68W Meridian: 6
FNL/FSL _____ FEL/FWL _____
Footage at surface: Distance: 1014 feet Direction: FSL Distance: 1870 feet Direction: FWL
As Drilled Latitude: 40.119670 As Drilled Longitude: -105.011030
GPS Data: GPS Quality Value: 1.8 Type of GPS Quality Value: PDOP Date of Measurement: 08/09/2019
GPS Instrument Operator's Name: Josh Shirley
FNL/FSL _____ FEL/FWL _____
** If directional footage at Top of Prod. Zone Dist: 460 feet Direction: FNL Dist: 945 feet Direction: FWL
Sec: 21 Twp: 2N Rng: 68W
FNL/FSL _____ FEL/FWL _____
** If directional footage at Bottom Hole Dist: 473 feet Direction: FSL Dist: 942 feet Direction: FWL
Sec: 33 Twp: 2N Rng: 68W
Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 08/29/2019 Date TD: 03/23/2020 Date Casing Set or D&A: 03/25/2020
Rig Release Date: 04/08/2020 Per Rule 308A.b.

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

Total Depth MD 19102 TVD** 7413 Plug Back Total Depth MD 19072 TVD** 7413
Elevations GR 4901 KB 4929 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

MWD/LWD (IND in 123-20125)

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	24	16	42	0	127	95	0	127	VISU
SURF	13+1/2	9+5/8	40	0	2,254	890	0	2,254	VISU
1ST	8+1/2	5+1/2	20	0	19,086	2,416	3,500	19,102	CALC

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	
SUSSEX	4,291		NO	NO	
SHANNON	4,897		NO	NO	
SHARON SPRINGS	7,299		NO	NO	
NIOBRARA	7,467		NO	NO	

Operator Comments:

TPZ footages are estimated; well is not completed. Estimated completion Q4 2020.

Open Hole Logging Exception - No open-hole logs were run; Log used for the Exception was an Induction Log run on the HSR-Stromquist, 123-20125

Rule 317.p exception granted for the well.

No CBL or Cased Hole Log (if required) run or attached per Rule 502.b Variance for Rule 308A log submittal requirements. Please see approved variance (Doc #402383354)

GPS locations were taken on preset conductors.

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

Signed: _____

Print Name: Lindsey Organ

Title: Regulatory Coordinator

Date: _____

Email: lindsey.organ@crestonepr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402414991	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402414989	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>			
402414986	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402414987	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402414988	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)

