

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:

402376736

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: 10261 Contact Name: MARK BROWN
Name of Operator: BAYSWATER EXPLORATION & PRODUCTION LLC Phone: (303) 893-2503
Address: 730 17TH ST STE 500 Fax:
City: DENVER State: CO Zip: 80202 Email: mbrown@bayswater.us

API Number 05-123-50497-00 County: WELD
Well Name: COT West Well Number: X-30-25HN
Location: QtrQtr: NESW Section: 30 Township: 7N Range: 66W Meridian: 6
Footage at surface: Distance: 2077 feet Direction: FSL Distance: 1973 feet Direction: FWL
As Drilled Latitude: 40.543750 As Drilled Longitude: -104.824919
GPS Data: GPS Quality Value: 1.8 Type of GPS Quality Value: PDOP Date of Measurement: 04/28/2020
GPS Instrument Operator's Name: Brian Hopkinson
** If directional footage at Top of Prod. Zone Dist: 236 feet Direction: FSL Dist: 2528 feet Direction: FEL
** If directional footage at Bottom Hole Dist: 221 feet Direction: FSL Dist: 152 feet Direction: FWL
Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/25/2020 Date TD: 03/07/2020 Date Casing Set or D&A: 03/08/2020
Rig Release Date: 04/19/2020 Per Rule 308A.b.

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

Total Depth MD 15966 TVD** 7056 Plug Back Total Depth MD 15931 TVD** 7056
Elevations GR 4946 KB 4971 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
MWD/LWD, Mud, CBL, RES in API 05-123-50408

Empty box for additional information or notes.

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	26	16	42	0	80	400	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,539	397	0	1,539	VISU
1ST	8+1/2	5+1/2	20	0	15,954	2,020	1,900	15,954	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	4,119		NO	NO	
SUSSEX	4,715		NO	NO	
SHANNON	5,409		NO	NO	
SHARON SPRINGS	7,656		NO	NO	
NIOBRARA	7,683		NO	NO	

Operator Comments:

Alternative Logging based on a log in another well on same pad: RES on API# 05-123-50408, COT EAST O-30-29HN.
When wells are Completed, updated TPZ will be reported on the Form 5A.

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

Signed: _____ Print Name: SEAN DOLFINGER

Title: Regulatory & Engin. Tech. Date: _____ Email: sean.dolfinger@iptenergyservices.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402380338	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402380344	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>			
402380328	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402380329	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402380333	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402380335	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402380337	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402380345	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402403733	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	rt'd to DRAFT - reporting of logs run does not meet requirements	06/30/2020

Total: 1 comment(s)

