

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:

402033134

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>8960</u>	Contact Name: <u>Kate Miller</u>
Name of Operator: <u>BONANZA CREEK ENERGY OPERATING COMPANY</u>	Phone: <u>(720) 440-6116</u>
Address: <u>410 17TH STREET SUITE #1400</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>regulatory@bonanzacr.com</u>

API Number <u>05-123-48259-00</u>	County: <u>WELD</u>
Well Name: <u>Antelope</u>	Well Number: <u>T34-19-18MRLNB</u>
Location: QtrQtr: <u>SESE</u> Section: <u>19</u> Township: <u>5N</u> Range: <u>62W</u> Meridian: <u>6</u>	
	FNL/FSL <span style="float: right;">FEL/FWL</span>
Footage at surface: Distance: <u>225</u> feet Direction: <u>FSL</u> Distance: <u>1228</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.378354</u> As Drilled Longitude: <u>-104.361118</u>	
GPS Data: GPS Quality Value: <u>1.6</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>02/11/2019</u>	
GPS Instrument Operator's Name: <u>Allen Shaffett</u>	FNL/FSL <span style="float: right;">FEL/FWL</span>
** If directional footage at Top of Prod. Zone Dist: <u>470</u> feet Direction: <u>FSL</u> Dist: <u>1360</u> feet Direction: <u>FEL</u>	
Sec: <u>19</u> Twp: <u>5N</u> Rng: <u>62W</u>	FNL/FSL <span style="float: right;">FEL/FWL</span>
** If directional footage at Bottom Hole Dist: <u>760</u> feet Direction: <u>FSL</u> Dist: <u>1578</u> feet Direction: <u>FEL</u>	
Sec: <u>18</u> Twp: <u>5N</u> Rng: <u>62W</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) 03/06/2019 Date TD: 04/04/2019 Date Casing Set or D&A: 04/05/2019  
 Rig Release Date: 04/05/2019 Per Rule 308A.b.

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

Total Depth MD <u>11641</u> TVD** <u>6406</u> Plug Back Total Depth MD <u>11595</u> TVD** <u>6406</u>
Elevations GR <u>4658</u> KB <u>4675</u> <b>Digital Copies of ALL Logs must be Attached per Rule 308A</b> <input checked="" type="checkbox"/>

List Electric Logs Run:  
Mud, CBL, MWD/LWD, (Resistivity 123-48258)

### 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	1,606	520	0	1,606	VISU
1ST	8+1/2	5+1/2	20	0	11,606	1,710	1,193	11,616	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	3,510				
SHARON SPRINGS	6,242				
NIOBRARA	6,445				

Operator Comments:

TPZ was estimated, actual TPZ will be listed on the form 5A.

No open-hole logs were run. A Resistivity log was run on ANTELOPE O24-19-18XRLNC (123-48258).

Spud date reported on mud log is incorrect. Correct spud date reported on this form.

Elevations on CBL are incorrect. Correct elevations are listed on this form.

Formation tops called out on mudlogs are incorrect, as they were determined by outside mud log contractors. Bonanza Creek geologists have determined correct formation tops. The correct formation tops are reported on this form.

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

Signed: \_\_\_\_\_

Print Name: Aubrey Noonan

Title: Regulatory Analyst

Date: \_\_\_\_\_

Email: regulatory@bonanzacrck.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402035274	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402061279	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>			
402035320	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402035321	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402060886	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402060989	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402060995	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402060998	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402061277	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	This Form 5 pushed back to "Draft" on 7/9/2020 per operator request.	07/09/2020

Total: 1 comment(s)

