

FORM  
5Rev  
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:

402491950

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: 10728

Contact Name: SEAN STRICKLAND

Name of Operator: GULF EXPLORATION LLC

Phone: (405) 840-3371

Address: 9701 N BROADWAY EXTENSION

Fax: (405) 840-0625

City: OKLAHOMA CITY State: OK Zip: 73114

Email: sstrickland@gulfoexploration.com

API Number 05-123-47681-00

County: WELD

Well Name: Black Powder

Well Number: 2

 Location: QtrQtr: SESW Section: 10 Township: 7N Range: 63W Meridian: 6  
 FNL/FSL FEL/FWL

Footage at surface: Distance: 600 feet Direction: FSL Distance: 1900 feet Direction: FWL

As Drilled Latitude: 40.583000 As Drilled Longitude: -104.425100

GPS Data: GPS Quality Value: 1.1 Type of GPS Quality Value: Date of Measurement: 02/06/2018

GPS Instrument Operator's Name: Scott Estabrooks

FNL/FSL

FEL/FWL

 \*\* If directional footage at Top of Prod. Zone Dist: feet Direction: Dist: feet Direction:  
 Sec: Twp: Rng:

FNL/FSL

FEL/FWL

 \*\* If directional footage at Bottom Hole Dist: feet Direction: Dist: feet Direction:  
 Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/16/2020 Date TD: 08/20/2020 Date Casing Set or D&amp;A: 08/22/2020

Rig Release Date: 08/23/2020 Per Rule 308A.b.

Well Classification:

☒ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 8900 TVD\*\* Plug Back Total Depth MD 7562 TVD\*\*

Elevations GR 4838 KB 4861

Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

Resistivity, Dual Neutron/Photo-Density, Microlog

## 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	12+1/4	9+5/8	36	0	878	284	0	878	VISU
1ST	8+3/4	5+1/2	17	0	7,603	307	6,072	7,603	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	
PIERRE	1,580				
NIOBRARA	6,600				
MOWRY	7,382				
DAKOTA-JSND	7,400				
DAKOTA	7,668				
ENTRADA	8,020				
BLAINE	8,626				
LYONS	8,660				

Operator Comments:

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

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

Print Name: Sean Strickland

Title: Operations Manager

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

Email: sstrickland@gulfoexploration.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402492999	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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>			
402492203	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402492206	PDF-POROSITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402492207	PDF-MICROLOG	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402492950	PDF-CBL 2ND RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402492955	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402492961	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date
Permit	1) Missing CBL 2) Missing .las log file(s) 3) Missing Cement Job summary attachment(s) 4) Missing additional formation top depths on Formation Information tab (should list all encountered formations and their top depths) 5) Missing as-drilled GPS data (data provided is from planned data off of Form 2). THIS DATA WILL REMAIN AS PLANNED GPS DATA ON THIS FORM 5 AND THE AS-DRILLED GPS DATA WILL BE SUBMITTED VIA FORM 6 SRA, PER OPERATOR PHONE CONVERSATION 9/18/2020.	09/18/2020

Total: 1 comment(s)

