

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:

402489605

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 05-123-47062-00

County: WELD

Well Name: East Ault

Well Number: 6-7-8HNB

Location: QtrQtr: NWNE Section: 18 Township: 7N Range: 65W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 300 feet Direction: FNL Distance: 2292 feet Direction: FEL

As Drilled Latitude: 40.581677 As Drilled Longitude: -104.704662

GPS Data: GPS Quality Value: 1.5 Type of GPS Quality Value: PDOP Date of Measurement: 09/23/2020

GPS Instrument Operator's Name: Ron Pratt

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 768 feet Direction: FSL Dist: 460 feet Direction: FWL
Sec: 7 Twp: 7N Rng: 65W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole Dist: 767 feet Direction: FSL Dist: 471 feet Direction: FEL
Sec: 8 Twp: 7N Rng: 65W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/01/2020 Date TD: 06/14/2020 Date Casing Set or D&A: 06/16/2020

Rig Release Date: 08/16/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 18397 TVD** 7165 Plug Back Total Depth MD 18367 TVD** 7165

Elevations GR 4908 KB 4933

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

List Electric Logs Run:

CBL, MUD, MWD/LWD, CNL in 123-47066

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	43	0	80	400	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,552	650	0	1,552	VISU
1ST	8+1/2	5+1/2	20	0	18,391	2,825	110	18,391	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	4,351		NO	NO	
SUSSEX	5,045		NO	NO	
SHANNON	5,622		NO	NO	
SHARON SPRINGS	8,135		NO	NO	
NIOBRARA	8,158		NO	NO	

Operator Comments:

The East Ault 10-18-19HC well, API No. 123-05-47066, located on this pad was logged from below kick off point at a MD of 7,676' up into surface casing to a depth of 500' with a Compensated Neutron – Gamma Ray Log. This log was run after discovery that an open hole resistivity log was not obtained from any well on the pad and is further outlined in our letter to the Director dated 10-9-20. After well Completion, the TPZ will be reported on the Form 5A if it changes from what is reported on this Form 5.

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

Signed: _____

Print Name: PAUL GOTTLÖB

Title: Regulatory & Engin. Tech. Date: _____ Email: paul.gottlob@iptenergyservices.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402494546	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402494549	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>					
402494478	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402494479	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402494480	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402494548	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402494605	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402494606	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402509307	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402509308	LAS-CEMENT BOND	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)

