

FORM
5

Rev
02/20

State of Colorado Oil and Gas Conservation Commission

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Document Number:

402407612

Date Received:

06/01/2020

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>10459</u>	Contact Name: <u>Kamrin Stiver</u>
Name of Operator: <u>EXTRACTION OIL & GAS INC</u>	Phone: <u>(720) 9747743</u>
Address: <u>370 17TH STREET SUITE 5300</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>kstiver@extractionog.com</u>

API Number <u>05-123-50285-00</u>	County: <u>WELD</u>
Well Name: <u>GP Cody Fed</u>	Well Number: <u>20E-15-2</u>
Location: QtrQtr: <u>NENE</u> Section: <u>20</u> Township: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>682</u> feet Direction: <u>FNL</u> Distance: <u>1305</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.389987</u> As Drilled Longitude: <u>-104.682507</u>	
GPS Data: GPS Quality Value: <u>1.8</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>04/09/2020</u>	
GPS Instrument Operator's Name: <u>D.WIMMER</u>	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>363</u> feet Direction: <u>FNL</u> Dist: <u>1386</u> feet Direction: <u>FEL</u>	
Sec: <u>20</u> Twp: <u>5N</u> Rng: <u>65W</u>	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>308</u> feet Direction: <u>FNL</u> Dist: <u>199</u> feet Direction: <u>FWL</u>	
Sec: <u>22</u> Twp: <u>5N</u> Rng: <u>65W</u>	
Field Name: <u>DJ HORIZONTAL NIOBRARA</u> Field Number: <u>16950</u>	
Federal, Indian or State Lease Number: _____	

Spud Date: (when the 1st bit hit the dirt) 01/03/2020 Date TD: 02/11/2020 Date Casing Set or D&A: 02/12/2020
Rig Release Date: 04/06/2020 Per Rule 308A.b.

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

Total Depth MD <u>14211</u> TVD** <u>6954</u> Plug Back Total Depth MD <u>14139</u> TVD** <u>6957</u>
Elevations GR <u>4673</u> KB <u>4702</u> Digital Copies of ALL Logs must be Attached per Rule 308A <input checked="" type="checkbox"/>

List Electric Logs Run:
CBL, Mud Log, MWD/LWD, (Dual Induction on 123-24990).

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	80	100	0	80	VISU
SURF	12+1/4	9+5/8	36	0	1,611	590	0	1,611	VISU
1ST	8+1/2	5+1/2	20	0	14,189	2,288	1,920	14,211	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	3,701		NO	NO	
SUSSEX	4,189		NO	NO	
SHANNON	4,844		NO	NO	
SHARON SPRINGS	6,863		NO	NO	
NIOBRARA	6,890		NO	NO	

Operator Comments:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 ½" casing) crosses the 460' setback hardline. The actual footages will be submitted with the Form 5A.
Alternative Logging Program-No open hole Resistivity log with Gamma Ray was run on this well per rule 317.p.
A Dual Induction log was run on the CDOT-2 D7 (123-24990).

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

Signed: _____ Print Name: Kamrin Stiver

Title: Drilling Technician Date: 6/1/2020 Email: kstiver@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402408188	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"/>
Other Attachments			
402407612	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407822	CEMENT BOND_PDF	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407823	MUD_PDF	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407824	MWD/LWD_LAS	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407825	MWD/LWD_PDF	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407826	CEMENT JOB SUMMARY_PRODUCTION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402407827	CEMENT JOB SUMMARY_SURFACE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402408187	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Corrected field name Corrected logs run abbreviation Corrected 1st string cement bottom per attached directional survey and cement job summary Passed engineering review	11/02/2020
Permit	• TPZ footages estimated; BHL footages ok.	08/12/2020

Total: 2 comment(s)

