

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:

402205095

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: 69175 Contact Name: Cassie Gonzalez  
Name of Operator: PDC ENERGY INC Phone: (303) 860-5800  
Address: 1775 SHERMAN STREET - STE 3000 Fax: \_\_\_\_\_  
City: DENVER State: CO Zip: 80203 Email: Cassie.Gonzalez@pdce.com

API Number 05-123-45972-00 County: WELD  
Well Name: Ferguson Well Number: 23G-212  
Location: QtrQtr: SWNW Section: 23 Township: 5N Range: 64W Meridian: 6  
FNL/FSL FEL/FWL  
Footage at surface: Distance: 2244 feet Direction: FNL Distance: 420 feet Direction: FWL  
As Drilled Latitude: 40.385911 As Drilled Longitude: -104.524887  
GPS Data: GPS Quality Value: 1.6 Type of GPS Quality Value: \_\_\_\_\_ Date of Measurement: 10/07/2019  
GPS Instrument Operator's Name: Brock Nelson FNL/FSL FEL/FWL  
\*\* If directional footage at Top of Prod. Zone Dist: 2118 feet Direction: FNL Dist: 40 feet Direction: FEL  
Sec: 22 Twp: 5N Rng: 64W FNL/FSL FEL/FWL  
\*\* If directional footage at Bottom Hole Dist: 2118 feet Direction: FNL Dist: 2240 feet Direction: FEL  
Sec: 24 Twp: 5N Rng: 64W  
Field Name: WATTENBERG Field Number: 90750  
Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 08/27/2019 Date TD: 08/28/2019 Date Casing Set or D&A: 08/28/2019  
Rig Release Date: 09/08/2019 Per Rule 308A.b.

Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 1693 TVD\*\* 1693 Plug Back Total Depth MD \_\_\_\_\_ TVD\*\* \_\_\_\_\_

Elevations GR 4575 KB 4598 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

### 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	1,674	780	0	1,674	VISU

**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	

Operator Comments:

Only the surface portion of this well was drilled and surface casing set. Drilling activity was suspended on 8/28/2019 and is anticipated to commence on 3/16/2020. No logs were run on this well.

Top of Productive Zone and Bottom hole location footages are based on approved APD footages due to drilling activity being suspended. Footages will be corrected on the final Form 5 submission.

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

Signed: \_\_\_\_\_ Print Name: Cassie Gonzalez

Title: Regulatory Technician Date: \_\_\_\_\_ Email: Cassie.Gonzalez@pdce.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
402205347	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

