

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:

400977885

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>10071</u>	Contact Name: <u>Kate Miller</u>
Name of Operator: <u>HIGHPOINT OPERATING CORPORATION</u>	Phone: <u>(303) 241-6910</u>
Address: <u>555 17TH ST STE 3700</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>regulatory@civiresources.com</u>

API Number <u>05-123-42156-00</u>	County: <u>WELD</u>
Well Name: <u>Anschutz Equus Farms</u>	Well Number: <u>4-62-9-4956C2</u>
Location: QtrQtr: <u>SWSW</u> Section: <u>9</u> Township: <u>4N</u> Range: <u>62W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>1090</u> feet Direction: <u>FSL</u> Distance: <u>250</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>40.322450</u> As Drilled Longitude: <u>-104.338283</u>	
GPS Data: GPS Quality Value: <u>1.4</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>01/19/2016</u>	
GPS Instrument Operator's Name: <u>CHAD MEIRES</u>	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>875</u> feet Direction: <u>FSL</u> Dist: <u>591</u> feet Direction: <u>FWL</u>	
Sec: <u>9</u> Twp: <u>4N</u> Rng: <u>62W</u>	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>859</u> feet Direction: <u>FSL</u> Dist: <u>501</u> feet Direction: <u>FEL</u>	
Sec: <u>10</u> Twp: <u>4N</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) 12/15/2015 Date TD: 12/22/2015 Date Casing Set or D&A: 12/23/2015
Rig Release Date: 01/16/2016 Per Rule 308A.b.

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

Total Depth MD <u>15974</u> TVD** <u>6229</u> Plug Back Total Depth MD <u>15920</u> TVD** <u>6229</u>
Elevations GR <u>4526</u> KB <u>4542</u> Digital Copies of ALL Logs must be Attached per Rule 308A <input checked="" type="checkbox"/>

List Electric Logs Run:
CBL, MUD, MWD/LWD, RES

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+3/4	9+5/8	36	0	806	340	0	806	VISU
1ST	8+3/4	7	26	0	6,609	590	980	6,609	CBL
1ST LINER	6+1/8	4+1/2	11.6	5755	15,968	650	5,755	15,974	CALC

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	3,289				
SUSSEX	4,032				
SHANNON	4,553				
SHARON SPRINGS	5,991				
NIOBRARA	6,154				

Operator Comments:

The TPZ is actual.
PBSD is taken from Float Collar.
Resistivity log was ran on this well. Approved APD had BMP requiring one well on this pad to be logged with open hole resistivity log with gamma ray.

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

Signed: _____ Print Name: Ashley Noonan

Title: Sr. Regulatory Analyst Date: _____ Email: regulatory@civiresources.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402879499	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402871130	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>			
402872335	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872338	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872340	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872347	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872349	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872351	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402872360	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402880673	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402880674	LAS-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402880675	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to Draft 10/12/2018 due to missing cement summary for 1st liner	10/12/2018

Total: 1 comment(s)