

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:

401784619

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>05-123-46853-00</u>	County: <u>WELD</u>
Well Name: <u>Critter Creek</u>	Well Number: <u>240-1411H</u>
Location: QtrQtr: <u>SWSW</u> Section: <u>14</u> Township: <u>11N</u> Range: <u>63W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>382</u> feet Direction: <u>FSL</u> Distance: <u>770</u> feet Direction: <u>FWL</u>	
As Drilled Latitude: <u>40.916273</u> As Drilled Longitude: <u>-104.406720</u>	
GPS Data: GPS Quality Value: <u>1.8</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>10/08/2018</u>	
GPS Instrument Operator's Name: <u>RYAN WILLIAMS</u>	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>370</u> feet Direction: <u>FSL</u> Dist: <u>2375</u> feet Direction: <u>FWL</u>	
Sec: <u>14</u> Twp: <u>11N</u> Rng: <u>63W</u>	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>240</u> feet Direction: <u>FNL</u> Dist: <u>2367</u> feet Direction: <u>FWL</u>	
Sec: <u>11</u> Twp: <u>11N</u> Rng: <u>63W</u>	
Field Name: <u>HEREFORD</u> Field Number: <u>34200</u>	
Federal, Indian or State Lease Number: _____	

Spud Date: (when the 1st bit hit the dirt) 06/14/2018 Date TD: 06/25/2018 Date Casing Set or D&A: 06/26/2018

Rig Release Date: 08/08/2018 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 17992 TVD** 7257 Plug Back Total Depth MD 17929 TVD** 7258

Elevations GR 5218 KB 5238 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

MWD/LWD; CBL; (RESISTIVITY IN 05-123-46848)

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	20	16	65	0	100	10	0	100	VISU
SURF	13+1/2	9+5/8	36	0	1,529	445	0	1,529	VISU
1ST	8+3/4	7	23	0	8,000	590	994	8,000	CBL
1ST LINER	6+1/8	4+1/2	11.6	7629	17,988	680	7,629	17,992	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	
PIERRE	3,186		NO	NO	
PARKMAN	4,137		NO	NO	
SHARON SPRINGS	7,116		NO	NO	
NIOBRARA	7,153		NO	NO	

Operator Comments:

PBTD is taken from wet shoe sub.
The TPZ is actual.
The BHL location was drilled past the 460' setback, however the actual BPZ is reported on the Form 5A.
Alternative Logging Program: No open-hole logs were ran on this well. A Resistivity log was ran on Critter Creek 540-1411H (API 05-123-46848. Approved APD had BMP requiring one well on 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: Senior Regulatory Analyst Date: _____ Email: regulatory@civiresources.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402906868	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401788923	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>			
401788891	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401788904	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401788909	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401788933	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402942495	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>
Permit	This Form returned to "Draft" on 11/9/2021 as part of Highpoint AOC Batch 5.	11/09/2021

Total: 1 comment(s)