

FORM
5

Rev
12/20

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:

402986476

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>10459</u>	Contact Name: <u>Kamrin Stiver</u>
Name of Operator: <u>EXTRACTION OIL & GAS INC</u>	Phone: <u>(720) 5578326</u>
Address: <u>370 17TH STREET SUITE 5200</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>kstiver@civiresources.com</u>

API Number <u>05-123-48275-00</u>	County: <u>WELD</u>
Well Name: <u>VIC EAST</u>	Well Number: <u>16E-20-01</u>
Location: QtrQtr: <u>SENE</u> Section: <u>20</u> Township: <u>7N</u> Range: <u>67W</u> Meridian: <u>6</u>	
	FNL/FSL FEL/FWL
Footage at surface: Distance: <u>2148</u> feet Direction: <u>FNL</u> Distance: <u>272</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.561222</u> As Drilled Longitude: <u>-104.908788</u>	
GPS Data: GPS Quality Value: <u>1.9</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>01/27/2022</u>	

** If directional footage at Top of Prod. Zone	Dist: <u>241</u> feet	Direction: <u>FSL</u>	Dist: <u>460</u> feet	Direction: <u>FWL</u>
Sec: <u>16</u> Twp: <u>7N</u> Rng: <u>67W</u>				
		FNL/FSL		FEL/FWL

** If directional footage at Bottom Hole	Dist: <u>253</u> feet	Direction: <u>FSL</u>	Dist: <u>459</u> feet	Direction: <u>FEL</u>
Sec: <u>15</u> Twp: <u>7N</u> Rng: <u>67W</u>				

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: 2656.13

Spud Date: (when the 1st bit hit the dirt) 12/10/2021 Date TD: 12/26/2021 Date Casing Set or D&A: 12/27/2021

Rig Release Date: 01/16/2022 Per Rule 308A.b.

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

Total Depth MD 17404 TVD** 7275 Plug Back Total Depth MD 17399 TVD** 2775

Elevations GR 5004 KB 5028 Digital Copies of ALL Logs must be Attached

List All Logs Run:
CBL, MWD, MUD, RESISTIVITY

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 2850 Fresh Water (bbls): 906

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2480

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	24	16	A52	42	0	104	100	104	0	VISU
SURF	13+1/2	9+5/8	J55	40	0	1662	550	1662	0	VISU
1ST	8+1/2	5+1/2	P110	17	0	17399	2725	17399	1435	CBL

Bradenhead Pressure Action Threshold 499 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

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	3,497		NO	NO	
SUSSEX	4,130		NO	NO	
SHANNON	5,093		NO	NO	
FORT HAYS	7,700		NO	NO	
CODELL	8,056		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.
 Open hole resistivity log with gamma ray was run on this well per rule 317.p. A resistivity log was run on this well.
 We faulted past Sharon Springs and Niobrara.

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: _____

Email: kstiver@civresources.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402986872	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402986875	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>			
402986484	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402986485	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402986867	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402986868	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402986869	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402986870	DIRECTIONAL DATA	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)