

FORM  
5Rev  
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:

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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: 10459

Contact Name: Kamrin Stiver

Name of Operator: EXTRACTION OIL &amp; GAS INC

Phone: (303) 3128532

Address: 370 17TH STREET SUITE 5200

Fax:

City: DENVER

State: CO

Zip: 80202

Email: kstiver@civiresources.com

API Number 05-014-20766-00

County: BROOMFIELD

Well Name: INTERCHANGE A

Well Number: S22-30-8N

Location: QtrQtr: SWNW Section: 10 Township: 1S Range: 68W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 2294 feet Direction: FNL Distance: 1147 feet Direction: FWL

As Drilled Latitude: 39.980349 As Drilled Longitude: -104.993094

GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 11/06/2019

\*\* If directional footage at Top of Prod. Zone Dist: 150 feet Direction: FNL Dist: 2187 feet Direction: FWL  
Sec: 10 Twp: 1S Rng: 68W\*\* If directional footage at Bottom Hole Dist: 460 feet Direction: FSL Dist: 2168 feet Direction: FWL  
Sec: 22 Twp: 1S Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 09/23/2019 Date TD: 03/26/2022 Date Casing Set or D&amp;A: 03/27/2022

Rig Release Date: 05/28/2022 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 23992 TVD\*\* 7907 Plug Back Total Depth MD 23973 TVD\*\* 7907

Elevations GR 5232 KB 5260

Digital Copies of ALL Logs must be Attached



List All Logs Run:

CBL, MWD, (RESISTIVITY 014-20850-01)

## FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 6662

Fresh Water (bbls): 1170

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2501

**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             | A252  | 42    | 0             | 80            | 100       | 80      | 0       | VISU   |
| SURF        | 13+1/2       | 9+5/8          | J55   | 36    | 0             | 1637          | 550       | 1637    | 0       | VISU   |
| 1ST         | 8+1/2        | 5+1/2          | P110  | 20    | 0             | 23973         | 3835      | 23973   | 0       | CBL    |

Bradenhead Pressure Action Threshold 491 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        | 4,940          |        | NO               | NO    |   |
| SUSSEX         | 5,448          |        | NO               | NO    |   |
| SHANNON        | 5,827          |        | NO               | NO    |   |
| SHARON SPRINGS | 8,325          |        | NO               | NO    |   |
| NIOBRARA       | 8,375          |        | 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 resistivity log was run on Interchange A S22-20-1C (014-20850-01)

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

Signed: \_\_\_\_\_

Print Name: Kamrin StiverTitle: Drilling Technician

Date: \_\_\_\_\_

Email: kstiver@civiresources.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?                              |  |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> |                       |   |  |
| 403120936                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | Core Analysis         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| 403120935                   | 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>    |                       |   |  |
| 403120931                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 403120932                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 403120933                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 403120934                   | 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)