

FORM  
5Rev  
02/20State 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:

402374776

Date Received:

04/23/2020

## 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: 10518

Contact Name: Brittany Rothe

Name of Operator: CONFLUENCE DJ LLC

Phone: (303) 226-9519

Address: 1125 17TH STREET #1550

Fax:

City: DENVER

State: CO

Zip: 80202

Email: brothe@confluencelp.com

API Number 05-123-48439-00

County: WELD

Well Name: Silverton

Well Number: 5-2-4L

 Location: QtrQtr: SWNW Section: 4 Township: 4N Range: 63W Meridian: 6  
 FNL/FSL FEL/FWL

Footage at surface: Distance: 2684 feet Direction: FNL Distance: 255 feet Direction: FWL

As Drilled Latitude: 40.341320 As Drilled Longitude: -104.451510

GPS Data: GPS Quality Value: 1.9 Type of GPS Quality Value: PDOP Date of Measurement: 04/07/2020

GPS Instrument Operator's Name: Kyle Daley

FNL/FSL

FEL/FWL

 \*\* If directional footage at Top of Prod. Zone Dist: feet Direction: Dist: feet Direction:  
 Sec: Twp: Rng:

FNL/FSL

FEL/FWL

 \*\* If directional footage at Bottom Hole Dist: feet Direction: Dist: feet Direction:  
 Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/02/2020 Date TD: 03/02/2020 Date Casing Set or D&amp;A: 03/02/2020

Rig Release Date: 03/03/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 1592 TVD\*\* 1579 Plug Back Total Depth MD 1582 TVD\*\* 1569

Elevations GR 4624 KB 4645

Digital Copies of ALL Logs must be Attached per Rule 308A



List Electric Logs Run:

None

## 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   | 26           | 16             | 43    | 0             | 80            | 400       | 0       | 80      | VISU   |
| SURF        | 13+1/2       | 9+5/8          | 36    | 0             | 1,582         | 470       | 0       | 1,582   | 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:

Confluence has suspended drilling operations in order to evaluate the economic viability of horizontal development in this area prior to continuing the Silverton program.

The anticipated date of resumption of drilling is TBD pending the results of Confluence's economic analysis.

Confluence will comply with all bradenhead and MIT testing requirements during the suspension of operations.

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

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

Print Name: Ryan Bruner

Title: Regulatory Project Mgr

Date: 4/23/2020

Email: rbruner@cdhconsult.com

## Attachment Check List

| Att Doc Num | Document Name | attached ? |  |
|-------------|---------------|------------|--|
|-------------|---------------|------------|--|

### Attachment Checklist

|           |                       |   |  |
|-----------|-----------------------|---|--|
| 402379269 | CMT Summary *         | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|           | Core Analysis         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| 402374778 | 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 type="checkbox"/>            | No <input checked="" type="checkbox"/> |
|           | Other                 | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |

### Other Attachments

|           |                  |   |                             |
|-----------|------------------|---|-----------------------------|
| 402374776 | FORM 5 SUBMITTED | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402374777 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 402374780 | WELLBORE DIAGRAM | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

## General Comments

| User Group       | Comment  | Comment Date |
|------------------|--|--------------|
| Engineering Tech | Corrected surface string cement bottom to equal setting depth. | 10/11/2022   |

Total: 1 comment(s)