

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:

403209406

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: 10661

Contact Name: Kamrin Stiver

Name of Operator: CIVITAS NORTH LLC

Phone: (303) 3128532

Address: 555 17TH STREET #3700

Fax:

City: DENVER

State: CO

Zip: 80202

Email: kstiver@civiresources.com

API Number 05-123-51436-00

County: WELD

Well Name: Grotheer 5-61

Well Number: 11B-14-23-1

Location: QtrQtr: SESE

Section: 11

Township: 5N

Range: 61W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 460 feet

Direction: FSL

Distance: 1182 feet

Direction: FEL

As Drilled Latitude: 40.409843

As Drilled Longitude: -104.170229

GPS Data: GPS Quality Value: 2.0

Type of GPS Quality Value: PDOP

Date of Measurement: 08/02/2022

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone

Dist: 460 feet

Direction: FNL

Dist: 2276 feet

Direction: FEL

Sec: 14

Twp: 5N

Rng: 61W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole

Dist: 361 feet

Direction: FSL

Dist: 2211 feet

Direction: FEL

Sec: 23

Twp: 5N

Rng: 61W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/26/2022

Date TD: 08/19/2022

Date Casing Set or D&amp;A: 08/20/2022

Rig Release Date: 08/27/2022 Per Rule 308A.b.

Well Classification:



Dry



Oil



Gas/Coalbed



Disposal



Stratigraphic



Enhanced Recovery



Storage



Observation

Total Depth MD 16443

TVD\*\* 6148

Plug Back Total Depth MD 16435

TVD\*\* 6148

Elevations GR 4688

KB 4703

Digital Copies of ALL Logs must be Attached



List All Logs Run:

CBL, MWD, (RESISTIVITY (123-51223))

## FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 3601

Fresh Water (bbls): 950

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2003

**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   | 26           | 16             | A53B  | 53    | 0             | 114           | 50        | 114     | 0       | VISU   |
| SURF        | 13+1/2       | 9+5/8          | J55   | 36    | 0             | 1953          | 776       | 1953    | 0       | VISU   |
| 1ST         | 8+1/2        | 5+1/2          | P110  | 17    | 0             | 16435         | 2595      | 16435   | 488     | CBL    |

Bradenhead Pressure Action Threshold 586 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        | 3,283          |        | NO               | NO    |   |
| SUSSEX         | 4,060          |        | NO               | NO    |   |
| SHANNON        | 4,540          |        | NO               | NO    |   |
| SHARON SPRINGS | 6,017          |        | NO               | NO    |   |
| NIOBRARA       | 6,099          |        | NO               | NO    |   |

Operator Comments:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 1/2" 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 Grotheer 5-61 11A-2-1 (123-51223)

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@civiresources.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?  |
|-----------------------------|-----------------------|---|
| <u>Attachment Checklist</u> |                       |   |
| 403210319                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|                             | Core Analysis         | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 403210318                   | 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>    |                       |   |
| 403210310                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 403210312                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 403210313                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 403210314                   | 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)