

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:

403259520

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: 69175 Contact Name: Cassie Gonzalez
Name of Operator: PDC ENERGY INC Phone: (303) 860-5800
Address: 1775 SHERMAN STREET - STE 3000 Fax: _____
City: DENVER State: CO Zip: 80203 Email: Cassie.Gonzalez@pdce.com

API Number 05-123-50985-00 County: WELD
Well Name: Grays Federal Well Number: 04N
Location: QtrQtr: SWNW Section: 27 Township: 5N Range: 65W Meridian: 6
FNL/FSL FEL/FWL
Footage at surface: Distance: 1795 feet Direction: FNL Distance: 333 feet Direction: FWL
As Drilled Latitude: 40.372590 As Drilled Longitude: -104.657680
GPS Data: GPS Quality Value: 1.7 Type of GPS Quality Value: PDOP Date of Measurement: 04/08/2022

FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: 900 feet Direction: FNL Dist: 200 feet Direction: FEL
Sec: 28 Twp: 5N Rng: 65W

FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: 902 feet Direction: FNL Dist: 2464 feet Direction: FEL
Sec: 30 Twp: 5N Rng: 65W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 02/19/2022 Date TD: 10/12/2022 Date Casing Set or D&A: 10/12/2022

Rig Release Date: 11/14/2022 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 20243 TVD** 6925 Plug Back Total Depth MD 20221 TVD** 6925

Elevations GR 4656 KB 4684 Digital Copies of ALL Logs must be Attached

List All Logs Run:

CBL, MWD (DIL in 05-123-13474)

FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 5342 Fresh Water (bbls): 2800

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 3520

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
SURF	12+1/4	9+5/8	J-55	36	0	1680	629	1680	0	VISU
1ST	8+1/2	5+1/2	P-110	20	0	20236	2872	20236	1680	CBL

Bradenhead Pressure Action Threshold 504 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	3,699				
SUSSEX	4,178				
SHANNON	4,461				
SHARON SPRINGS	6,879				
NIOBRARA	6,932				

Operator Comments:

This well has not yet been completed. Anticipated date of completion is 3rd Quarter 2023.
 Top of Productive Zone footage is based on approved APD footage. Actual TPZ will be provided on the Form 5A.
 Open Hole Logging Exception- no open hole logs were run on this well; Compensated Neutron run on Grays Federal 01C (API: 05-123-51285) for the Cased Hole Neutron Requirement.
 Surface cement ticket submitted with the Preliminary Form 5.
 Surface casing setting depth on the Surface Casing Cement Job Summary reports depths from the 13' RKB of the surface rig.
 Surface casing setting depth on the Form 5 and all other supporting documents are reported from a 28' RKB elevation.
 TOC comment from our Engineer: Top of 12.9 ppg lead.

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

Signed: _____

Print Name: Cassie Gonzalez

Title: Regulatory Analyst

Date: _____

Email: Cassie.Gonzalez@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
403260090	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
403260091	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"/>
Other Attachments			
403260075	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403260078	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403260079	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403260092	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403286116	PDF-CBL 1ST RUN	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)