

FORM
5Rev
12/20

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403646309

Date Received:

01/05/2024

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

ECMC Operator Number: 8960

Contact Name: Kamrin Stiver

Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY

Phone: (303) 3128532

Address: 555 17TH STREET SUITE 3700

Fax:

City: DENVER

State: CO

Zip: 80202

Email: kstiver@civiresources.com

API Number 05-123-51215-00

County: WELD

Well Name: Pronghorn K-5 FED

Well Number: 32N-20-03

Location: QtrQtr: Lot 2

Section: 5

Township: 5N

Range: 61W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 231 feet

Direction: FNL Distance: 2131 feet

Direction: FEL

As Drilled Latitude: 40.436815

As Drilled Longitude: -104.231333

GPS Data: GPS Quality Value: 2.1

Type of GPS Quality Value: PDOP

Date of Measurement: 12/19/2023

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone

Dist: 184 feet

Direction: FNL

Dist: 2323 feet

Direction: FEL

Sec: 5

Twp: 5N

Rng: 61W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole

Dist: 184 feet

Direction: FNL

Dist: 2323 feet

Direction: FEL

Sec: 5

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) 12/06/2023

Date TD: 12/06/2023

Date Casing Set or D&A: 12/06/2023

Rig Release Date: 12/07/2023 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 1725

TVD** 1707

Plug Back Total Depth MD 1725

TVD** 1707

Elevations GR 4659

KB 4674

Digital Copies of ALL Logs must be Attached



List All Logs Run:

No logs ran

FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 1467

Fresh Water (bbls): 954

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 303

CASING, LINER AND CEMENT

| <u>Casing Type</u> | <u>Size of Hole</u> | <u>Size of Casing</u> | <u>Grade</u> | <u>Wt/Ft</u> | <u>Csg/Liner Top</u> | <u>Setting Depth</u> | <u>Sacks Cmt</u> | <u>Cmt Btm</u> | <u>Cmt Top</u> | <u>Status</u> |
|--------------------|---------------------|-----------------------|--------------|--------------|----------------------|----------------------|------------------|----------------|----------------|---------------|
| CONDUCTOR | 26 | 16 | B | 37 | 0 | 95 | 100 | 95 | 0 | VISU |
| SURF | 13+1/2 | 9+5/8 | J55 | 36 | 0 | 1725 | 721 | 1725 | 0 | VISU |

Bradenhead Pressure Action Threshold 518 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 ECMC) |
|----------------|----------------|--------|------------------|-------|--|
| | Top | Bottom | DST | Cored | |
| | | | | | |

Operator Comments:

Drilling was suspended after setting surface on this well due to economic and logistical reasons. Bonanza plans to complete drilling operations on this well third quarter 2026.

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: 1/5/2024 Email: kstiver@civiresources.com

ATTACHMENT LIST

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

Attachment Checklist

| | | | |
|-----------|-----------------------|---|--|
| 403646608 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 403646610 | 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

| | | | |
|-----------|------------------|---|-----------------------------|
| 403646309 | FORM 5 SUBMITTED | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 403646315 | 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)