

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:

403520871

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

ECMC Operator Number: 10261

Contact Name: JEFF OVERMAN

Name of Operator: BAYSWATER EXPLORATION & PRODUCTION LLC

Phone: (720) 881-4503

Address: 730 17TH ST STE 500

Fax:

City: DENVER

State: CO

Zip: 80202

Email: JOVERMAN@BAYSWATER.US

API Number 05-123-51522-00

County: WELD

Well Name: Sapphire

Well Number: 2

Location: QtrQtr: SENW Section: 5 Township: 6N Range: 65W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 2013 feet Direction: FNL Distance: 1390 feet Direction: FWL

As Drilled Latitude: 40.518610 As Drilled Longitude: -104.691845

GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 02/20/2023

** If directional footage at Top of Prod. Zone Dist: 150 feet Direction: FSL Dist: 685 feet Direction: FWL
Sec: 32 Twp: 7N Rng: 65W
FNL/FSL FEL/FWL** If directional footage at Bottom Hole Dist: 150 feet Direction: FNL Dist: 667 feet Direction: FWL
Sec: 29 Twp: 7N Rng: 65W
FNL/FSL FEL/FWL

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/15/2023 Date TD: 04/04/2023 Date Casing Set or D&A: 04/05/2023

Rig Release Date: 06/25/2023 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17997 TVD** 7085 Plug Back Total Depth MD 17986 TVD** 7085

Elevations GR 4817 KB 4840

Digital Copies of ALL Logs must be Attached



List All Logs Run:

CBL, MUD, MWD/LWD, RES IN API 123-51517

FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 2621

Fresh Water (bbls): 210

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2411

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	H-40	65	0	96	60	96	0	VISU
SURF	13+1/2	9+5/8	J-55	36	0	1592	411	1592	0	VISU
1ST	8+1/2	5+1/2	P-110	20	0	17986	2735	17986	0	

Bradenhead Pressure Action Threshold 478 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	
PARKMAN	3,890				
SUSSEX	4,660				
SHANNON	5,296				
SHARON SPRINGS	7,218				
NIOBRARA	7,240				

Operator Comments:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 ½" casing) crosses the 150' 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 Sapphire 13 (API 123-51517)

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

Signed: _____

Print Name: JEFF OVERMANTitle: DRILLING MANAGER Date: _____ Email: JOVERMAN@BAYSWATER.US

ATTACHMENT LIST

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
403540845	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
403520939	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>					
403520918	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
403520921	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
403520928	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
403520937	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
403540844	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	RTD – does not abide guidance for reporting logs run, no LAS logs uploaded, no MWD/LWD GR of horizontal portion uploaded – resubmit complete/correct by 3/7/25 – no review beyond documenting logging requirements	02/24/2025

Total: 1 comment(s)