

FORM
5Rev
02/08State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400159766

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

1. OGCC Operator Number: 69175

4. Contact Name: Jeff Glossa

2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION

Phone: (303) 831-3972

3. Address: 1775 SHERMAN STREET - STE 3000

Fax: (303) 860-5838

City: DENVER State: CO Zip: 80203

5. API Number 05-123-31870-00

6. County: WELD

7. Well Name: Bauer Debus

Well Number: 22ND

8. Location: QtrQtr: NENW Section: 22 Township: 5N Range: 64W Meridian: 6

Footage at surface: Distance: 599 feet Direction: FNL Distance: 1901 feet Direction: FWL

As Drilled Latitude: 40.390440 As Drilled Longitude: -104.538640

GPS Data:

Data of Measurement: 11/13/2010 PDOP Reading: 2.7 GPS Instrument Operator's Name: teve Cure

** If directional footage

at Top of Prod. Zone Distance: 1297 feet Direction: FNL Distance: 2610 feet Direction: FWL

Sec: 22 Twp: 5N Rng: 64W

at Bottom Hole Distance: 1296 feet Direction: FNL Distance: 2600 feet Direction: FWL

Sec: 22 Twp: 5N Rng: 64W

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/14/2010 13. Date TD: 10/17/2010 14. Date Casing Set or D&A: 10/18/2010

15. Well Classification:

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

16. Total Depth MD 7028 TVD 6904 17 Plug Back Total Depth MD 6992 TVD 6868

18. Elevations GR 4575 KB 4589

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

CBL, CNL/CDL/DIL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8		0	696	490	0	696	CALC
1ST	7+7/8	4+1/2		0	7,006	725	0	7,006	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	6,563		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	6,849		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	6,852		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: _____

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

Signed: _____ Print Name: Jeff Glossa

Title: Sr Engineering Tech Date: _____ Email: jglossa@petd.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400159776	CEMENT JOB SUMMARY
400159779	DIRECTIONAL SURVEY

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)