Document Number: 400383623

Date Received:

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
2. Name of Operator: PDC ENERGY INC
3. Address: 1775 SHERMAN STREET - STE 3000
   City: DENVER   State: CO   Zip: 80203

4. Contact Name: Jenifer Hakkarinen
   Phone: (303) 8605800
   Fax: (303) 8605838

5. API Number: 05-123-35722-00
6. County: WELD
7. Well Name: Riteaway   Well Number: 32J-103
8. Location: QtrQtr: NENW   Section: 32   Township: 5N   Range: 67W   Meridian: 6
   Footage at surface: Distance: 292 feet Direction: FNL   Distance: 1778 feet Direction: FWL
   As Drilled Latitude: 40.362640   As Drilled Longitude: -104.920170

GPS Data:
   Data of Measurement: 01/07/2013   PDOP Reading: 1.8   GPS Instrument Operator's Name: Holly L Tracy

   ** If directional footage at Top of Prod. Zone   Dist.: 2155 feet. Direction: FNL   Dist.: 933 feet. Direction: FWL
   Sec: 32   Twp: 5N   Rng: 67W
   ** If directional footage at Bottom Hole   Dist.: 525 feet. Direction: FSL   Dist.: 794 feet. Direction: FWL
   Sec: 32   Twp: 5N   Rng: 67W

9. Field Name: WILDCAT   10. Field Number: 99999
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/26/2012 13. Date TD: 14. Date Casing Set or D&A: 11/05/2012

15. Well Classification:
   ☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 10940 TVD** 6660   17 Plug Back Total Depth MD 10940 TVD** 6660

18. Elevations GR 4795 KB 4805   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,Gr

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	13+3/4	9+5/8	36	0	930	830	0	930	CALC
1ST	8+3/4	7	26	0	7,136	550	0	7,139	CALC
1ST LINER	6+1/8	4+1/2	13.5	6984	10,936				

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:

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	6,988		☐	☐	

Comment:

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

Signed: _____   Print Name: Jenifer Hakkarinen

Title: Regulatory Tech _____   Date: _____   Email: Jenifer.Hakkarinen@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
Attachment Checklist					
400383636	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400383632	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒
Other Attachments					
400383631	DIRECTIONAL DATA	Yes	☒	No	☐
400383639	LAS-CEMENT BOND	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)