

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

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



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Document Number:
400488556

Date Received:

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: 8960	4. Contact Name: Bryan Brown
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY	Phone: (720) 440-6100
3. Address: 410 17TH STREET SUITE #1400	Fax: (720) 279-2331
City: DENVER State: CO Zip: 80202	

5. API Number 05-123-37669-00	6. County: WELD
7. Well Name: State North Platte	Well Number: K-O-36HC
8. Location: QtrQtr: NWNW Section: 36 Township: 5N Range: 63W Meridian: 6	
Footage at surface: Distance: 350 feet Direction: FNL	Distance: 520 feet Direction: FWL
As Drilled Latitude:	As Drilled Longitude:

GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage at Top of Prod. Zone Dist.: 627 feet. Direction: FNL Dist.: 2591 feet. Direction: FWL

Sec: 36 Twp: 5n Rng: 63w

** If directional footage at Bottom Hole Dist.: 2199 feet. Direction: FSL Dist.: 2548 feet. Direction: FWL

Sec: 36 Twp: 5n Rng: 63w

9. Field Name: WATTENBERG	10. Field Number: 90750
11. Federal, Indian or State Lease Number: CO 2148.12	

12. Spud Date: (when the 1st bit hit the dirt) 08/13/2013	13. Date TD: 09/25/2013	14. Date Casing Set or D&A: 09/25/2013
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15. Well Classification:

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

16. Total Depth MD 9652 TVD** 6449	17 Plug Back Total Depth MD 7400 TVD** 6467
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18. Elevations GR 4543 KB 4558	One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.
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19. List Electric Logs Run:

gamma and mud

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+1/2	9+5/8	36	0	422	370	0	422	CALC
1ST	8+3/4	7	26	0	7,297	885	0	7,297	

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 09/24/2013					
Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE		125	7,400	7,900
Details of work:					
TIH open ended and spotted cement from 7900'-7400'					

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	
SHARON SPRINGS	6,596		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,733		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,209		<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: Bryan Brown

Title: Drilling Engineer Date: _____ Email: bbrown@bonanzacrk.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400491211	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" 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>					
400491215	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491219	LAS-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491220	PDF-	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)