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

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number:

400498167

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: 10261
2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION
3. Address: 730 17TH ST STE 610
   City: DENVER   State: CO   Zip: 80202

4. Contact Name: JONATHAN RUNGE
   Phone: (720) 420-5700
   Fax: (720) 420-5800

5. API Number   05-123-36084-00
6. County: WELD
7. Well Name: Booth   Well Number: 4-26
8. Location: QtrQtr: NWNE   Section: 26   Township: 7N   Range: 65W   Meridian: 6
   Footage at surface: Distance: 248 feet Direction: FNL   Distance: 2554 feet Direction: FEL
   As Drilled Latitude: 40.552291   As Drilled Longitude: -104.629790

GPS Data:
   Data of Measurement: 10/04/2013   PDOP Reading: 2.2   GPS Instrument Operator's Name: Bart Phifer

   ** If directional footage at Top of Prod. Zone   Dist.: 692 feet. Direction: FNL   Dist.: 641 feet. Direction: FWL
   Sec: 26   Twp: 7N   Rng: 65W
   ** If directional footage at Bottom Hole   Dist.: 684 feet. Direction: FNL   Dist.: 634 feet. Direction: FWL
   Sec: 26   Twp: 7N   Rng: 65W

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) 05/30/2013 13. Date TD: 06/02/2013 14. Date Casing Set or D&A: 06/04/2013

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

16. Total Depth   MD 7792   TVD** 7372   17 Plug Back Total Depth   MD 7739   TVD** 7319

18. Elevations   GR 4893   KB 4909   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:

Density, Neutron, Induction, Cement Bond

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	24	0	732	275	0	732	VISU
1ST	7+7/8	4+1/2	11.6	0	7,756	890	1,550	7,756	CBL

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	
PARKMAN	4,142		☐	☐	
SUSSEX	4,995		☐	☐	
SHANNON	5,598		☐	☐	
NIOBRARA	7,386		☐	☒	
FORT HAYS	7,600		☐	☐	
CODELL	7,635		☐	☐	

Comment:

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

Signed: _____   Print Name: JONATHAN RUNGE

Title: CONSULTANT   Date: _____   Email: jrunge@iptengineers.com

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
400498183	CMT Summary *	Yes ☒ No ☐
	Core Analysis	Yes ☐ No ☒
400498182	Directional Survey **	Yes ☒ No ☐
	DST Analysis	Yes ☐ No ☒
	Logs	Yes ☒ No ☐
	Other	Yes ☐ No ☒
Other Attachments		
400498176	DIRECTIONAL DATA	Yes ☒ No ☐
400498177	PDF-CEMENT BOND	Yes ☒ No ☐
400498178	LAS-TRIPLE COMBINATION	Yes ☒ No ☐
400498181	PDF-TRIPLE COMBINATION	Yes ☒ No ☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)