

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:
400487973

Date Received:
10/08/2013

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: Jenifer Hakkarinen
 2. Name of Operator: PDC ENERGY INC Phone: (303) 8605800
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 8605838
 City: DENVER State: CO Zip: 80203

5. API Number 05-123-36014-00 6. County: WELD
 7. Well Name: Danielson Well Number: 15G-412
 8. Location: QtrQtr: NWSW Section: 15 Township: 7N Range: 66W Meridian: 6
 Footage at surface: Distance: 2529 feet Direction: FSL Distance: 210 feet Direction: FWL
 As Drilled Latitude: 40.574860 As Drilled Longitude: -104.772750

GPS Data:
 Date of Measurement: 07/25/2013 PDOP Reading: 1.7 GPS Instrument Operator's Name: Holly L. Tracy

** If directional footage at Top of Prod. Zone Dist.: 2329 feet. Direction: FNL Dist.: 1216 feet. Direction: FWL
 Sec: 15 Twp: 7N Rng: 66W

** If directional footage at Bottom Hole Dist.: 2271 feet. Direction: FNL Dist.: 491 feet. Direction: FWL
 Sec: 15 Twp: 7N Rng: 66W

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) 02/14/2013 13. Date TD: 02/26/2013 14. Date Casing Set or D&A: 02/15/2013

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

16. Total Depth MD 12034 TVD** 7471 17 Plug Back Total Depth MD 12034 TVD** 7471

18. Elevations GR 4950 KB 4965 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, Gamma Ray

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	940	840	0	940	
1ST	8+3/4	7	26	0	7,905	630	400	7,905	
1ST LINER	7	4+1/2	13.5	7775	12,030				

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	
CODELL	7,882		<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: Jenifer Hakkarinen

Title: Regulatory Tech Date: 10/8/2013 Email: Jenifer.Hakkarinen@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400491463	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400531370	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"/>
Other Attachments			
400487973	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400491454	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400491455	LAS-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400491457	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Directional Survey is missing. Footages ok. Requested LAS mud log.	10/29/2013 2:33:57 PM

Total: 1 comment(s)