

DRILLING COMPLETION REPORT

Document Number:
400818700

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

OGCC Operator Number: 8960 Contact Name: Jessica Azzolina
 Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (720) 440-6100
 Address: 410 17TH STREET SUITE #1400 Fax: (720) 279-2331
 City: DENVER State: CO Zip: 80202

API Number 05-123-39209-00 County: WELD
 Well Name: State Seventy Holes Well Number: 21-24-4HNB
 Location: QtrQtr: NENW Section: 4 Township: 4N Range: 62W Meridian: 6
 Footage at surface: Distance: 350 feet Direction: FNL Distance: 1383 feet Direction: FWL
 As Drilled Latitude: 40.347970 As Drilled Longitude: -104.335910

GPS Data:
 Date of Measurement: 02/10/2015 PDOP Reading: 1.8 GPS Instrument Operator's Name: Adam Beauprez

** If directional footage at Top of Prod. Zone Dist.: 663 feet. Direction: FNL Dist.: 1970 feet. Direction: FWL
 Sec: 4 Twp: 4N Rng: 62W
 ** If directional footage at Bottom Hole Dist.: 470 feet. Direction: FSL Dist.: 1988 feet. Direction: FWL
 Sec: 4 Twp: 4N Rng: 62W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: OG 2140.12

Spud Date: (when the 1st bit hit the dirt) 12/24/2014 Date TD: 01/02/2015 Date Casing Set or D&A: 01/04/2015
 Rig Release Date: 02/07/2015 Per Rule 308A.b.

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

Total Depth MD 11015 TVD** 6212 Plug Back Total Depth MD 11015 TVD** 6212
 Elevations GR 4552 KB 4574 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Mud Log, CBL, (OH ran on State Seventy Holes F-J-4HC, same pad)

CASING, LINER AND CEMENT

| 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 | 447 | 200 | 0 | 447 | CALC |
| 1ST | 8+3/4 | 7 | 26 | 0 | 6,650 | 760 | 0 | 6,650 | CBL |
| 1ST LINER | 6+1/8 | 4+1/2 | 11.6 | 6400 | 11,007 | | | | VISU |

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:

FORMATION LOG INTERVALS AND TEST ZONES

| FORMATION NAME | Measured Depth | | Check if applies | | COMMENTS (All DST and Core Analysis must be submitted to COGCC) |
|----------------|----------------|--------|------------------|-------|---|
| | Top | Bottom | DST | Cored | |
| SHARON SPRINGS | 6,153 | | NO | NO | |
| NIOBRARA | 6,353 | | NO | NO | |

Comment:

OH ran on State Seventy Holes F-J-4HC, same pad

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

Signed: _____ Print Name: Jessica Azzolina

Title: Drilling Technician Date: _____ Email: jazzolina@bonanzacrk.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|------------------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 400818904 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400818757 | 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"/> |
| <u>Other Attachments</u> | | | |
| 400818752 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400818755 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400818756 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400821474 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

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

Total: 0 comment(s)