

FORM  
5Rev  
09/14

## State of Colorado

## Oil and Gas Conservation Commission

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



DE ET OE ES

Document Number:

401449064

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

OGCC Operator Number: 10459

Contact Name: Kamrin Ruder

Name of Operator: EXTRACTION OIL &amp; GAS INC

Phone: (720) 9747743

Address: 370 17TH STREET SUITE 5300

Fax:

City: DENVER

State: CO

Zip: 80202

API Number 05-123-44771-00

County: WELD

Well Name: HFE

Well Number: 8

Location: QtrQtr: SWSW Section: 22 Township: 4N Range: 68W Meridian: 6

Footage at surface: Distance: 1125 feet Direction: FSL Distance: 1075 feet Direction: FWL

As Drilled Latitude: 40.294723 As Drilled Longitude: -104.994906

GPS Data:

Date of Measurement: 09/12/2017 PDOP Reading: 1.7 GPS Instrument Operator's Name: Dominick Davis

\*\* If directional footage at Top of Prod. Zone Dist.: 1844 feet. Direction: FSL Dist.: 460 feet. Direction: FWL

Sec: 22 Twp: 4N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 1850 feet. Direction: FSL Dist.: 508 feet. Direction: FEL

Sec: 22 Twp: 4N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/23/2017 Date TD: 08/17/2017 Date Casing Set or D&amp;A: 08/20/2017

Rig Release Date: 09/04/2017 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11775 TVD\*\* 7051 Plug Back Total Depth MD 11748 TVD\*\* 7051

Elevations GR 4918 KB 4946 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MUD, MWD, (Triple Combo in API 123-44774)

## 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 |
|-------------|--------------|----------------|-------|---------------|---------------|-----------|---------|---------|--------|
| CONDUCTOR   | 24           | 16             | 42    | 0             | 80            | 100       | 0       | 80      | VISU   |
| SURF        | 12+1/4       | 9+5/8          | 36    | 0             | 1,544         | 550       | 0       | 1,544   | VISU   |
| 1ST         | 8+1/2        | 5+1/2          | 20    | 0             | 11,748        | 2,025     | 1,010   | 11,748  | 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:

## 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 |   |
| PARKMAN        | 3,250          |        | NO               | NO    |   |
| SUSSEX         | 3,880          |        | NO               | NO    |   |
| SHANNON        | 4,317          |        | NO               | NO    |   |
| SHARON SPRINGS | 6,988          |        | NO               | NO    |   |
| NIOBRARA       | 7,076          |        | NO               | NO    |   |

Comment:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 ½" casing) crosses the 460' setback hardline. The actual footages will be submitted with the Form 5A.

The triple combo log was ran on HFE 4 (123-44774).

The LAS version of the CBL is uploaded to show the vertical portion of GR.

There was an issue uploading the Production Cement Summary (PDF). It will be submitted via sundry.

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

Signed: \_\_\_\_\_

Print Name: Kamrin Ruder

Title: Drilling Technician

Date: \_\_\_\_\_

Email: kruder@extractionog.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?  |
|-----------------------------|-----------------------|---|
| <u>Attachment Checklist</u> |                       |   |
| 401449083                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|                             | Core Analysis         | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 401449084                   | 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>    |                       |   |
| 401449068                   | LAS-GAMMA RAY         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401449073                   | PDF-GAMMA RAY         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401449075                   | PDF-MUD               | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401449079                   | LAS-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401449080                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401449085                   | DIRECTIONAL DATA      | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

### General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|----------------|---------------------|
|                   |                | Stamp Upon Approval |

Total: 0 comment(s)