

FORM
5
Rev
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



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Document Number:
401453551

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 & GAS INC Phone: (720) 9747743
Address: 370 17TH STREET SUITE 5300 Fax:
City: DENVER State: CO Zip: 80202

API Number 05-123-44812-00 County: WELD
Well Name: MLD Well Number: 2
Location: QtrQtr: NWNW Section: 22 Township: 4N Range: 68W Meridian: 6
Footage at surface: Distance: 806 feet Direction: FNL Distance: 772 feet Direction: FWL
As Drilled Latitude: 40.303972 As Drilled Longitude: -104.996066

GPS Data:
Date of Measurement: 09/29/2017 PDOP Reading: 1.7 GPS Instrument Operator's Name: Ross Todd

** If directional footage at Top of Prod. Zone Dist.: 1032 feet. Direction: FNL Dist.: 1509 feet. Direction: FWL
Sec: 22 Twp: 4N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1032 feet. Direction: FNL Dist.: 1509 feet. Direction: FWL
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) 08/05/2017 Date TD: 08/21/2017 Date Casing Set or D&A: 08/24/2017
Rig Release Date: 09/22/2017 Per Rule 308A.b.

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

Total Depth MD 6705 TVD** 6038 Plug Back Total Depth MD 3340 TVD** 3010

Elevations GR 4877 KB 4902 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
ALL LOGS RAN ON SIDETRACK

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	1,579	550	0	1,579	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	
PARKMAN	3,209		NO	NO	

Comment:

We were drilling the MLD 2 and got stuck coming out of the hole to pick up an agitator. We unsuccessfully fished the BHA for 3 days. We sidetracked around 3,340'.
 API # - 05-123-44812-00
 Total MD Drilled – 6,705'
 Surface Casing – 9-5/8" 36# set at 1,567'
 Proposed Fish – Bit, mud motor, MWD, and 1 jt HWDP Bottom of fish @ 6,705, Top of fish @ 6,548'
 Open hole sidetrack plan: Sidetrack around 3,340' and continue drilling to original targets.
 Depth of Sidetrack- 3,340' MD
 Objective formation of sidetrack – Niobrara (same as APD)
 Proposed BHL – Sec 22 – TWP 4N 68W 2480 FSL 460 FEL (same as approved)

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 ?	
Attachment Checklist			
401463974	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401463975	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
401463977	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)