

FORM  
5Rev  
09/14State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:

401461204

Date Received:

11/16/2017

## DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 69175

Contact Name: Kelsi Welch

Name of Operator: PDC ENERGY INC

Phone: (303) 831-3974

Address: 1775 SHERMAN STREET - STE 3000

Fax:

City: DENVER State: CO Zip: 80203

API Number 05-069-06179-00

County: LARIMER

Well Name: MOUNTAIN VIEW SCHOOL

Well Number: 1

Location: QtrQtr: NWSW Section: 25 Township: 5N Range: 68W Meridian: 6

Footage at surface: Distance: 1980 feet Direction: FSL Distance: 660 feet Direction: FWL

As Drilled Latitude: As Drilled Longitude:

GPS Data:

Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

\*\* If directional footage at Top of Prod. Zone Dist.: feet Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

\*\* If directional footage at Bottom Hole Dist.: feet Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: JOHNSON'S CORNER

Field Number: 42570

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/28/1983 Date TD: Date Casing Set or D&amp;A:

Rig Release Date: 11/06/1983 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7662 TVD\*\* Plug Back Total Depth MD TVD\*\*

Elevations GR 4936 KB 4946 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

## 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	12+1/4	8+5/8	24	0	549	400	0	549	
1ST	7+7/8	4+1/2	11.6	0	7,662	275	6,386	7,662	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 10/23/2017

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	765	252	170	752

Details of work:

Mountain View School #1 (05-069-06179)  
Remedial Annular Fill Procedure

- Surface Csg: 8 5/8" – 24# - Set @ 549' w/ 400 sks
- Production Csg: 4.5" – 11.6# - Set @ 7662' w/ 275 sks
- CBL Production TOC @ 6386'

Following continuing WBI preparation...

- 1) Spear and unland 4.5" production casing. NU cement flange.
- 2) TIH 1 1/4" CS Hydril to 765' in production casing annular space.
- 3) Rolled hole clean and established circulation.
- 4) RU cementers. Mix and pump 252 sx 15.8# class G cmt for annular coverage from 750' to surface.
- 5) ND cement flange and re-land 4.5" production casing.
- 6) Run CBL from 1000' to surface to confirm adequate cement coverage.
- 7) Continued with originally planned WBI prep.

### **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	

Operator Comments

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

Signed: \_\_\_\_\_ Print Name: Kelsi Welch

Title: Production tech Date: 11/16/2017 Email: kelsi.welch@pdce.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401461211	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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>			
401461204	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401461210	PDF-CEMENT BOND	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)