

DRILLING COMPLETION REPORT

Document Number:
401587957

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: 10633 Contact Name: Renee Kendrick
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 309-1931
 Address: 1801 CALIFORNIA STREET #2500 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-123-45829-00 County: WELD
 Well Name: File Well Number: 3S-32H-K268
 Location: QtrQtr: NESW Section: 32 Township: 2n Range: 68w Meridian: 6
 Footage at surface: Distance: 1760 feet Direction: FNL Distance: 1772 feet Direction: FWL
 As Drilled Latitude: 40.092573 As Drilled Longitude: -105.030574

GPS Data:
 Date of Measurement: 03/14/2018 PDOP Reading: 1.6 GPS Instrument Operator's Name: Jason Dahlman

** If directional footage at Top of Prod. Zone Dist.: 927 feet. Direction: FNL Dist.: 2275 feet. Direction: FWL
 Sec: 32 Twp: 2N Rng: 68W
 ** If directional footage at Bottom Hole Dist.: 1891 feet. Direction: FSL Dist.: 2274 feet. Direction: FWL
 Sec: 20 Twp: 2N Rng: 68W

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

Spud Date: (when the 1st bit hit the dirt) 11/11/2017 Date TD: 12/12/2017 Date Casing Set or D&A: 12/12/2017
 Rig Release Date: 02/20/2018 Per Rule 308A.b.

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

Total Depth MD 18633 TVD** 7450 Plug Back Total Depth MD 18580 TVD** 7451
 Elevations GR 4970 KB 4993 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Mud Log, MWD/LWD, CBL, (Pulsed Neutron in 123-38072)

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	20	52.78	0	98	190	0	98	VISU
SURF	13+1/2	9+5/8	40	0	1,947	735	0	1,947	VISU
1ST	8+3/4	5+1/2	20	0	18,612	2,892	0	18,612	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	
SUSSEX	4,368				
SHANNON	4,956				
NIOBRARA	7,305				
SHARON SPRINGS	7,382				

Comment:

TPZ footages are estimated; well is not completed. Estimated completion Q2 2018.

No open-hole logs were run; Cased-hole Pulsed Neutron Log was run on the File 3G-32H-K268 well, 123-38072; per BMP on APD; Rule 317.p exception granted for the well.

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

Signed: _____

Print Name: Renee Kendrick

Title: Regulatory Coordinator

Date: _____

Email: renee.kendrick@crestonepr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401595663	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401595661	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			
401595639	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401595646	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401595647	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401595648	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401595650	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401595659	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)