

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.

Document Number:
400491221

Date Received:

Completion Type Final completion Preliminary completion

OGCC Operator Number: 69175 Contact Name: Ally Ota

Name of Operator: PDC ENERGY INC Phone: (303) 860-5800

Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 831-3988

City: DENVER State: CO Zip: 80203

API Number 05-123-36298-00 County: WELD

Well Name: Simonsen-Schaefer Well Number: 7J-403

Location: QtrQtr: SWSW Section: 6 Township: 6N Range: 66W Meridian: 6

Footage at surface: Distance: 310 feet Direction: FSL Distance: 1188 feet Direction: FWL

As Drilled Latitude: 40.509860 As Drilled Longitude: -104.828030

GPS Data:
Date of Measurement: 10/20/2013 PDOP Reading: 1.8 GPS Instrument Operator's Name: Holly L. Tracy

** If directional footage at Top of Prod. Zone Dist.: 710 feet. Direction: FNL Dist.: 1446 feet. Direction: FWL
Sec: 7 Twp: 6N Rng: 66W

** If directional footage at Bottom Hole Dist.: 501 feet. Direction: FSL Dist.: 1517 feet. Direction: FWL
Sec: 7 Twp: 6N Rng: 66W

Field Name: EATON Field Number: 19350

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 06/12/2013 Date TD: 06/24/2013 Date Casing Set or D&A: 06/25/2013

Rig Release Date: 07/10/2013 Per Rule 308A.b.

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

Total Depth MD 11900 TVD** 7321 Plug Back Total Depth MD 11892 TVD** 7321

Elevations GR 4891 KB 4906 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MWD

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+3/4	9+5/8	36	0	930	830	0	930	VISU
1ST	8+3/4	7	26	0	7,758	640	790	7,758	CBL
1ST LINER	6+1/8	4+1/2	13.5	7616	11,896				

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	3,678				
SUSSEX	4,395				
SHANNON	4,813				
SHARON SPRINGS	6,944				
NIOBRARA	7,059				
FORT HAYS	7,821				
CODELL	8,093				
CARLILE	10,399				

Comment:

No open hole logs were run on this pad. APD was approved with no logging BMPs or exceptions.
7" TOC at 790', top picked at fluid level.

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

Signed: _____

Print Name: Cassie Gonzalez

Title: Regulatory Technician

Date: _____

Email: Cassie.Gonzalez@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401963294	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401963290	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			
401963181	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401963312	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402017365	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402017366	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402017367	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402043599	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Return to draft for AOC settlement.	09/06/2016
Permit	Operator concurs with TPZ at 640 FNL. WO PDF of gamma ray.	04/24/2014
Permit	Received Directional Survey. Using 7" casing point of 7758, TPZ calculates to 640 FNL. Checking w/opr. Corrected TPZ and BHL both to section 7. Missing PDF of gamma ray.	04/23/2014
Permit	Second reminder to opr.	04/22/2014
Permit	Missing Directional Survey (BHL ok, need to calculate TPZ)	12/24/2013

Total: 5 comment(s)

