

DRILLING COMPLETION REPORT

Document Number:
401895455

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: 10110 Contact Name: Renee Kendrick
 Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (720) 595-2114
 Address: 1001 17TH STREET #2000 Fax: _____
 City: DENVER State: CO Zip: 80202

API Number 05-123-44335-00 County: WELD
 Well Name: Ottesen LE Well Number: 06-290HN
 Location: QtrQtr: NWSE Section: 33 Township: 1N Range: 66W Meridian: 6
 Footage at surface: Distance: 1410 feet Direction: FSL Distance: 1593 feet Direction: FEL
 As Drilled Latitude: 40.004328 As Drilled Longitude: -104.778379

GPS Data:
 Date of Measurement: 01/23/2019 PDOP Reading: 1.6 GPS Instrument Operator's Name: RYAN WILLIAMS

** If directional footage at Top of Prod. Zone Dist.: 1563 feet. Direction: FSL Dist.: 596 feet. Direction: FEL
 Sec: 5 Twp: 1S Rng: 66W
 ** If directional footage at Bottom Hole Dist.: 1605 feet. Direction: FSL Dist.: 2532 feet. Direction: FWL
 Sec: 6 Twp: 1S Rng: 66W

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

Spud Date: (when the 1st bit hit the dirt) 11/03/2018 Date TD: 01/13/2019 Date Casing Set or D&A: 01/15/2019
 Rig Release Date: 01/24/2019 Per Rule 308A.b.

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

Total Depth MD 17953 TVD** 7580 Plug Back Total Depth MD 17944 TVD** 7580
 Elevations GR 5076 KB 5096 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
Composite, Mud, MWD/LWD, CBL, (Composite in 123-44337)

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+1/2	9+5/8	36	0	1,777	799	0	1,777	VISU
1ST	8+1/2	5+1/2	17	0	17,953	1,845	3,380	17,953	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	5,434	5,591	NO	NO	
SUSSEX	5,921	6,219	NO	NO	
SHANNON	7,030	7,243	NO	NO	
SHARON SPRINGS	9,421		NO	NO	
NIOBRARA	9,654		NO	NO	

Comment:

This well was drilled during the first rig occupation on the Ottesen Pad.

No open-hole logs were run; Open-hole composite log was run on the Ottesen LE 06-311HC (123-44337); Approved APD had BMP requiring one well on pad to be logged with an open hole resistivity log with gamma ray.

The Lat/Long on the composite log is reported incorrectly

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: Sr. Regulatory Analyst Date: _____ Email: rkendrick@gwogco.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401970297	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401996135	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			
401969320	LAS-COMPOSITE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401969325	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401969330	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401969332	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401969335	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401969339	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970252	PDF-COMPOSITE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401970295	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)

