

FORM
5Rev
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:

402120284

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: 10633

Contact Name: Logan Siple

Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

Phone: (303) 579-2174

Address: 1801 CALIFORNIA STREET #2500

Fax:

City: DENVER State: CO Zip: 80202

API Number 05-123-48761-00

County: WELD

Well Name: Bighorn

Well Number: 4P-17H-P267

Location: QtrQtr: SESE Section: 17 Township: 2N Range: 67W Meridian: 6

Footage at surface: Distance: 924 feet Direction: FSL Distance: 680 feet Direction: FEL

As Drilled Latitude: 40.133670 As Drilled Longitude: -104.907620

GPS Data:

Date of Measurement: 06/24/2019 PDOP Reading: 3.6 GPS Instrument Operator's Name: Scott Porter

** If directional footage at Top of Prod. Zone Dist.: 460 feet. Direction: FSL Dist.: 1216 feet. Direction: FEL

Sec: 17 Twp: 2N Rng: 67W

** If directional footage at Bottom Hole Dist.: 2643 feet. Direction: FSL Dist.: 1257 feet. Direction: FEL

Sec: 8 Twp: 2N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/08/2019 Date TD: 03/27/2019 Date Casing Set or D&A: 03/29/2019

Rig Release Date: 06/21/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 15029 TVD** 7504 Plug Back Total Depth MD 15003 TVD** 7504

Elevations GR 4983 KB 4960 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MUD, MWD/LWD, CBL (IND in 123-11580)

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	122	55	0	122	VISU
SURF	13+1/2	9+5/8	40	0	2,392	1,030	0	2,407	VISU
1ST	8+1/2	5+1/2	20	0	15,018	2,010	602	15,029	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	4,448		NO	NO	
SHANNON	5,044		NO	NO	
TEEPEE BUTTES	6,505		NO	NO	
SHARON SPRINGS	7,316		NO	NO	
NIOBRARA	7,411	8,073	NO	NO	Faulted into Codell at 8073 ftMD
CODELL	8,073		NO	NO	

Comment:

TPZ footages are estimated; well is not completed. Estimated completion Q3 2019.

Open Hole Logging Exception - No open-hole logs were run; Logs used for the Exception was an Induction Log run on the Miller 3-17J well, 123-11580.

Cased-hole Pulsed Neutron Log was run on the Bighorn 4F-2H-D267 well, 123-41192; per BMP on APD; Rule 317.p exception granted for the well.

Cement Bond PDF contains the data from both .las files.

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

Signed: _____

Print Name: Lindsey Organ

Title: Regulatory Coordinator Date: _____ Email: lindsey.organ@crestonepr.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402120316	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402120315	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"/>
<u>Other Attachments</u>			
402120305	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402120307	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402120310	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402120312	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402120314	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402122650	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402122652	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402122653	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)

