

FORM
5Rev
10/14**State of Colorado**
Oil and Gas Conservation Commission

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



Document Number:

400501548

Date Received:

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/or 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 completionOGCC Operator Number: 69175Contact Name: Cassie GonzalezName of Operator: PDC ENERGY INCPhone: (303) 860-5800Address: 1775 SHERMAN STREET - STE 3000

Fax: _____

City: DENVER State: CO Zip: 80203Email: Cassie.Gonzalez@pdce.comAPI Number 05-123-36962-00County: WELDWell Name: WASTE MANAGEMENTWell Number: 2T-301Location: QtrQtr: SESE Section: 2 Township: 2N Range: 64W Meridian: 6
FNL/FSL FEL/FWLFootage at surface: Distance: 230 feet Direction: FSL Distance: 1326 feet Direction: FELAs Drilled Latitude: 40.160800 As Drilled Longitude: -104.513880

GPS Data:

Date of Measurement: 08/14/2019 PDOP Reading: 1.6 GPS Instrument Operator's Name: Tyler Blessing
FNL/FSL FEL/FWL** If directional footage at Top of Prod. Zone Dist: 791 feet Direction: FSL Dist: 1456 feet Direction: FEL
Sec: 2 Twp: 2N Rng: 64W** If directional footage at Bottom Hole Dist: 500 feet Direction: FNL Dist: 1528 feet Direction: FEL
Sec: 2 Twp: 2N Rng: 64WField Name: WATTENBERGField Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 07/17/2013 Date TD: 07/27/2013 Date Casing Set or D&A: 07/29/2013Rig Release Date: 10/01/2013 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 11316 TVD** 6864 Plug Back Total Depth MD 11308 TVD** 6864Elevations GR 4894 KB 4917Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MUD

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	938	840	0	938	VISU
1ST	8+3/4	7	26	0	7,258	628	800	7,258	CBL
1ST LINER	6+1/8	4+1/2	13.5	7144	11,312				

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	3,857				
SUSSEX	4,357				
SHANNON	5,157				
SHARON SPRINGS	6,612				
NIOBRARA	6,737				

Operator Comments:

Spud date is corect on Form 5 and incorrect on COGCC's website.
No open hole logs were run. APD was approved in 2013 with no logging BMPs or exceptions.
Corrections on CBL made by operator due to vendor losing large database files in truck fire.
TOC comments from our Engineer: 7" TOC, 11.2 lead with dropping amps, changing VDL in this area, and 6 bbls returned.
MUD log attached in place of MWD.

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

Signed: _____ Print Name: Cassie GonzalezTitle: Regulatory Technician Date: _____ Email: Cassie.Gonzalez@pdce.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402144373	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402144372	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>			
402190089	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402190090	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402190092	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402200434	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402200449	LAS-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	Returned to Draft per operator's request.	05/07/2015

Total: 1 comment(s)

