

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:

402244404

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 completion

OGCC Operator Number: 10459

Contact Name: Kamrin Ruder

Name of Operator: EXTRACTION OIL & GAS INC

Phone: (720) 9747743

Address: 370 17TH STREET SUITE 5300

Fax:

City: DENVER

State: CO

Zip: 80202

Email: kruder@extractionog.com

API Number 05-014-20746-00

County: BROOMFIELD

Well Name: Livingston

Well Number: S19-25-9N

Location: QtrQtr: NWSE

Section: 7

Township: 1S

Range: 68W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 2331 feet

Direction: FSL

Distance: 1384 feet

Direction: FEL

As Drilled Latitude: 39.978562

As Drilled Longitude: -105.039609

GPS Data:

Date of Measurement: 11/18/2019

PDOP Reading: 1.5

GPS Instrument Operator's Name: JAYME HOBIN

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone

Dist: 2452 feet

Direction: FSL

Dist: 2106 feet

Direction: FEL

Sec: 7

Twp: 1S

Rng: 68W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole

Dist: 509 feet

Direction: FSL

Dist: 2233 feet

Direction: FEL

Sec: 19

Twp: 1S

Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/09/2019

Date TD: 09/01/2019

Date Casing Set or D&A: 09/02/2019

Rig Release Date: 11/14/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 20835

TVD** 8091

Plug Back Total Depth MD 20826

TVD** 8091

Elevations GR 5322

KB 5341

Digital Copies of ALL Logs must be Attached per Rule 308A

☒

List Electric Logs Run:

CBL, MUD, MWD, (RESISTIVITY 014-20753)

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	80	100	0	80	VISU
SURF	12+1/4	9+5/8	36	0	1,628	525	0	1,628	VISU
1ST	8+1/2	5+1/2	20	0	20,830	3,365	190	20,830	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	4,678		NO	NO	
SUSSEX	5,052		NO	NO	
SHANNON	5,583		NO	NO	
SHARON SPRINGS	8,023		NO	NO	
NIOBRARA	8,040		NO	NO	

Operator Comments:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 ½" casing) is greater than or equal to 150' south of the center line of section 7, Township 1S, Range 68W. The actual footages will be submitted with the Form 5A.

Alternative Logging Program- No open hole resistivity log with gamma ray was run on this well. Resistivity ran on Livingston S19-25-2C (014-20753)

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

Signed: _____

Print Name: Kamrin RuderTitle: Drilling Technician

Date: _____

Email: kruder@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402244409	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402280225	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>					
402279172	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402280220	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402280222	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402280223	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402280224	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)

