

FORM
5Rev
02/20**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:

402092267

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: 10071

Contact Name: Allie Ryan

Name of Operator: HIGHPOINT OPERATING CORPORATION

Phone: (303) 312-8153

Address: 555 17TH ST STE 3700

Fax:

City: DENVER

State: CO

Zip: 80202

Email: aryan@hpres.com

API Number 05-123-49225-00

County: WELD

Well Name: Anschutz Equus Farms

Well Number: 5-61-35-4841B

Location: QtrQtr: NESE

Section: 34

Township: 5N

Range: 61W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 1686 feet

Direction: FSL

Distance: 345 feet

Direction: FEL

As Drilled Latitude: 40.354730

As Drilled Longitude: -104.186768

GPS Data: GPS Quality Value: 1.6 Type of GPS Quality Value: PDOP

Date of Measurement: 01/18/2019

GPS Instrument Operator's Name: Chad Meiers

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone

Dist: 1727 feet

Direction: FSL

Dist: 505 feet

Direction: FWL

Sec: 35

Twp: 5N

Rng: 61W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole

Dist: 1702 feet

Direction: FSL

Dist: 402 feet

Direction: FEL

Sec: 36

Twp: 5N

Rng: 61W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/20/2019

Date TD: 04/28/2019

Date Casing Set or D&A: 04/29/2019

Rig Release Date: 05/08/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 15944

TVD** 5824

Plug Back Total Depth MD 15882

TVD** 5825

Elevations GR 4480

KB 4496

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

☒

List Electric Logs Run:

MWD/LWD, RES in [123-48186-00]

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	20	16	84	0	80				
SURF	13+1/2	9+5/8	36	0	1,007	315	0	1,007	VISU
1ST	8+3/4	7	23	0	6,210	740	0	6,210	CALC
2ND	6+1/8	4+1/2	11.6	0	15,937	510	5,141	15,937	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	3,098	3,438	NO	NO	
SUSSEX	3,855	4,139	NO	NO	
SHANNON	4,285	4,530	NO	NO	
SHARON SPRINGS	5,616		NO	NO	
NIOBRARA	5,879		NO	NO	

Operator Comments:

- PBTD is taken from the wet shoe sub set depth
- Please utilize the "Casing" tab for actual depths as sources reference different datums, which result in a different depth.
- Top of cement calculation is based on the Contractor's cement ticket.
- No open-hole logs were run on this well. Per rule 317.p., a Resistivity log was run on the Anschutz Equus Farms Fed 5-61-34-5764B well (123-48186-00).

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

Signed: _____

Print Name: Allie Ryan

Title: Regulatory Analyst

Date: _____

Email: aryan@hpres.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402092374	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402092315	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>			
402092311	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402094196	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402094200	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402094205	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402402963	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>
Permit	Returned to draft - 5/19/2020 -Operator request to make corrections	05/19/2020

Total: 1 comment(s)

