

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:

402414855

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: 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

Email: logan.siple@crestonepr.com

API Number 05-123-49800-00

County: WELD

Well Name: Herbers

Well Number: 11-20H-B167

Location: QtrQtr: NWNE Section: 20 Township: 1N Range: 67W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 830 feet Direction: FNL Distance: 2302 feet Direction: FEL

As Drilled Latitude: 40.041520 As Drilled Longitude: -104.913260

GPS Data: GPS Quality Value: 2.4 Type of GPS Quality Value: PDOP Date of Measurement: 09/24/2019

GPS Instrument Operator's Name: Scott Porter

FNL/FSL FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 460 feet Direction: FNL Dist: 612 feet Direction: FEL
Sec: 20 Twp: 1N Rng: 67W** If directional footage at Bottom Hole Dist: 2164 feet Direction: FNL Dist: 585 feet Direction: FEL
Sec: 29 Twp: 1N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/16/2019 Date TD: 03/29/2020 Date Casing Set or D&A: 03/31/2020

Rig Release Date: 04/08/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 15298 TVD** 7700 Plug Back Total Depth MD 15269 TVD** 7700

Elevations GR 5107 KB 5130

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

List Electric Logs Run:

MUD, MWD/LWD (IND in 123-19695)

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	81	0	122	VISU
SURF	13+1/2	9+5/8	40	0	2,586	1,003	0	2,586	VISU
1ST	8+1/2	5+1/2	20	0	15,284	1,961	3,000	15,298	CALC

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	4,815		NO	NO	
SHANNON	5,484		NO	NO	
SHARON SPRINGS	7,669		NO	NO	
NIOBRARA	7,710		NO	NO	

Operator Comments:

TPZ footages are estimated; well is not completed. Estimated completion Q4 2020.

Open Hole Logging Exception - No open-hole logs were run; Log used for the Exception was an Induction Log run on the Herbers 31-20, 123-19695

Rule 317.p exception granted for the well.

No CBL or Cased Hole Log (if required) run or attached per Rule 502.b Variance for Rule 308A log submittal requirements. Please see approved variance (Doc #402383496)

GPS locations were taken on preset conductors.

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>		
402414863	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402414861	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>		
402414856	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402414857	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402414858	LAS-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402414859	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402414860	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)

