

FORM
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Rev
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:

402407541

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: <u>10459</u>	Contact Name: <u>Kamrin Stiver</u>
Name of Operator: <u>EXTRACTION OIL & GAS INC</u>	Phone: <u>(720) 9747743</u>
Address: <u>370 17TH STREET SUITE 5300</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>kstiver@extractionog.com</u>

API Number <u>05-123-41144-00</u>	County: <u>WELD</u>
Well Name: <u>GP JACKSON FED</u>	Well Number: <u>17W-25-6</u>
Location: QtrQtr: <u>NENE</u> Section: <u>20</u> Township: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u>	
FNL/FSL FEL/FWL	
Footage at surface: Distance: <u>526</u> feet Direction: <u>FNL</u> Distance: <u>1305</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.390417</u> As Drilled Longitude: <u>-104.682506</u>	
GPS Data: GPS Quality Value: <u>1.4</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>04/09/2020</u>	
GPS Instrument Operator's Name: <u>D.WIMMER</u>	FNL/FSL FEL/FWL
** If directional footage at Top of Prod. Zone Dist: <u>1503</u> feet Direction: <u>FSL</u> Dist: <u>1739</u> feet Direction: <u>FEL</u>	
Sec: <u>17</u> Twp: <u>5N</u> Rng: <u>65W</u>	FNL/FSL FEL/FWL
** If directional footage at Bottom Hole Dist: <u>1503</u> feet Direction: <u>FSL</u> Dist: <u>1739</u> feet Direction: <u>FEL</u>	
Sec: <u>17</u> Twp: <u>5N</u> Rng: <u>65W</u>	
Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>	
Federal, Indian or State Lease Number: _____	

Spud Date: (when the 1st bit hit the dirt) 12/22/2019 Date TD: 03/12/2020 Date Casing Set or D&A: 12/22/2019

Rig Release Date: 04/06/2020 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD <u>7723</u> TVD** <u>7140</u> Plug Back Total Depth MD <u>1595</u> TVD** <u>1560</u>
Elevations GR <u>4674</u> KB <u>4703</u> Digital Copies of ALL Logs must be Attached per Rule 308A <input type="checkbox"/>

List Electric Logs Run:

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	1,595	590	0	1,595	VISU

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	

Operator Comments:

While drilling the curve on GP Jackson Fed 17W-25-6, the build rates were not sufficient to land in the correct formation. We tried a different drilling assembly to attempt to get larger build rates, but the new assembly was not successful at giving enough yield. We landed in the Carlile rather than the Codell. This formation was not stable, and to avoid getting stuck and losing tools we set a cement plug at 6,640' and sidetracked from the vertical to re-drill the curve and land in the Codell.

API: 05-123-41144
 Total MD Drilled: 7723
 Surface Casing: 1595
 Sidetrack Plan: Set 500' Cement plug top at 6640
 Depth of Sidetrack: 6790'
 Objective Formation of Sidetrack: Codell (Same as APD)
 Proposed BHL: 1412 FSL, 460 FWL (same as APD)
 (Email approval given by Diana Burn 3/13/2020)

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

Signed: _____ Print Name: Kamrin Stiver

Title: Drilling Technician Date: _____ Email: kstiver@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
402407709	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402408042	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 type="checkbox"/> No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
402448027	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	returned to DRAFT for confirmation of directional data	07/21/2020

Total: 1 comment(s)

