

FORM
5Rev
12/20

State of Colorado

Energy & Carbon Management Commission

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



Document Number:

403925697

Date Received:

09/18/2024

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

ECMC Operator Number: 10459

Contact Name: Kamrin Stiver

Name of Operator: EXTRACTION OIL & GAS INC

Phone: (303) 3128532

Address: 555 17TH STREET SUITE 3700

Fax:

City: DENVER

State: CO

Zip: 80202

Email: kstiver@civiresources.com

API Number 05-123-52411-00

County: WELD

Well Name: Jesser East

Well Number: 3E-20-02

Location: QtrQtr: NWSW Section: 3 Township: 4N Range: 68W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 2316 feet Direction: FSL Distance: 716 feet Direction: FWL

As Drilled Latitude: 40.341713 As Drilled Longitude: -104.996637

GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 07/24/2024

** If directional footage at Top of Prod. Zone Dist: 1166 feet Direction: FNL Dist: 150 feet Direction: FEL
Sec: 3 Twp: 4N Rng: 68W
FNL/FSL FEL/FWL** If directional footage at Bottom Hole Dist: 1159 feet Direction: FNL Dist: 151 feet Direction: FEL
Sec: 1 Twp: 4N Rng: 68W
FNL/FSL FEL/FWL

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/03/2024 Date TD: 07/13/2024 Date Casing Set or D&A: 07/14/2024

Rig Release Date: 07/18/2024 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 19242 TVD** 7262 Plug Back Total Depth MD 19217 TVD** 7262

Elevations GR 5110 KB 5135

Digital Copies of ALL Logs must be Attached



List All Logs Run:

CBL, MWD, RES

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 3995

Fresh Water (bbls): 1110

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2023

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	26	16	B	42.09	0	80	100	80	0	VISU
SURF	13+1/2	9+5/8	J55	36	0	1678	711	1678	0	VISU
1ST	8+1/2	5+1/2	P110	20	0	19217	3020	19217	1150	CBL

Bradenhead Pressure Action Threshold 503 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

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 ECMC)
	Top	Bottom	DST	Cored	
PARKMAN	3,798		NO	NO	
SUSSEX	5,045		NO	NO	
SHANNON	5,782		NO	NO	
SHARON SPRINGS	8,129		NO	NO	
NIOBRARA	8,181		NO	NO	
FORT HAYS	8,649		NO	NO	
CODELL	8,729		NO	NO	

Operator Comments:

The TPZ footages are estimates calculated through Directional Plotting Software—from where the production string (5 ½" casing) crosses the 460' setback hardline. The actual footages will be submitted with the Form 5A.
Open hole resistivity log with gamma ray was run on this well per rule 317.p.

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

Signed: _____

Print Name: Kamrin StiverTitle: Drilling TechnicianDate: 9/18/2024Email: kstiver@civiresources.com

ATTACHMENT LIST

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
403925709	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
403925714	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>			
403925701	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403925716	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403925717	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403925720	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403925721	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403925722	LAS-RESISTIVITY	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)