

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:

402771128

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

ECMC Operator Number: 10669

Contact Name: Erin Lind

Name of Operator: NICKEL ROAD OPERATING LLC

Phone: (314) 374-5572

Address: 3773 CHERRY CRK NORTH DR #670

Fax:

City: DENVER

State: CO

Zip: 80209

Email: erin.lind@nickelroadoperating.com

API Number 05-123-51476-00

County: WELD

Well Name: BLEHM ST

Well Number: 7X-HNC-10-07-67

Location: QtrQtr: NENE Section: 9 Township: 7N Range: 67W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 572 feet Direction: FNL Distance: 714 feet Direction: FEL

As Drilled Latitude: 40.594387 As Drilled Longitude: -104.891201

GPS Data: GPS Quality Value: 1.3 Type of GPS Quality Value: PDOP Date of Measurement: 07/02/2021

** If directional footage at Top of Prod. Zone Dist: 1919 feet Direction: FSL Dist: 482 feet Direction: FWL
Sec: 9 Twp: 7N Rng: 67W** If directional footage at Bottom Hole Dist: 1919 feet Direction: FSL Dist: 482 feet Direction: FWL
Sec: 9 Twp: 7N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 05/01/2021 Date TD: 05/24/2021 Date Casing Set or D&A: 05/01/2021

Rig Release Date: 06/29/2021 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7942 TVD** 5734 Plug Back Total Depth MD 7942 TVD** 5734

Elevations GR 5094 KB 5121

Digital Copies of ALL Logs must be Attached



List All Logs Run:

MWD/LWD, MUD, RES/GR IN API # 123-51479-00

FLUID VOLUMES USED IN DRILLING OPERATIONS

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

Total Fluids (bbls): 863

Fresh Water (bbls): 306

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 0

CASING, LINER AND CEMENT

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>	<u>Status</u>
CONDUCTOR	24	16	H-40	43	0	80	100	80	0	VISU
SURF	13+1/2	9+5/8	J-55	36	0	1730	625	1730	0	VISU
OPEN HOLE	8+1/2				1730	7942				

Bradenhead Pressure Action Threshold 519 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	4,300		NO	NO	
SUSSEX	5,505		NO	NO	
SHANNON	6,000		NO	NO	

Operator Comments:

THIS FORM 5 IS REPORTING THE -00 OH WELLBORE DATA FOR THE BLEHM ST 7X-HNC-10-07-67. FOR DETAILS ON THE SIDETRACK -01 WELLBORE, PLEASE REFER TO FORM 5 DOC #402771123.

THE KOP FOR THIS WELL BEGINS AT 7124' MD.

ALTERNATIVE LOGGING PROGRAM – NO OPEN HOLE LOGS WERE RUN ON THIS WELL. RESISTIVITY WITH GAMMA RAY LOG WAS RUN ON THE BLEHM 5X-HC-10-07-67 (API # 123-51479-00).

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

Signed: _____

Print Name: Erin Lind

Title: Senior Regulatory Analyst Date: _____ Email: erin.lind@nickelroadoperating.com

ATTACHMENT LIST

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402774465	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402781757	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>					
402774438	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402774445	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402781760	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	1/22/2025--the attached mud logs go to the -01 wellbore. --emailed operator re: GL and KB difference between Drlg tab and attachments. 2/8/2025 --RTD to delete the mud log, per operator --per operator, updated GL and KB on the Drlg tab to match the attachments. Passed form.	01/22/2025

Total: 1 comment(s)