

FORM  
5

Rev  
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:

403634896

Date Received:

12/22/2023

### 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: <u>69175</u>	Contact Name: <u>Randy Thweatt</u>
Name of Operator: <u>PDC ENERGY INC</u>	Phone: <u>(303) 228-4000</u>
Address: <u>1099 18TH STREET SUITE 1500</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>denverregulatory@chevron.onmicrosoft.com</u>

API Number <u>05-123-51790-00</u>	County: <u>WELD</u>
Well Name: <u>Hen</u>	Well Number: <u>08N</u>
Location: QtrQtr: <u>SWNE</u> Section: <u>8</u> Township: <u>4N</u> Range: <u>64W</u> Meridian: <u>6</u>	
	FNL/FSL <span style="float: right;">FEL/FWL</span>
Footage at surface: Distance: <u>2189</u> feet Direction: <u>FNL</u> Distance: <u>2044</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>40.328130</u> As Drilled Longitude: <u>-104.572340</u>	
GPS Data: GPS Quality Value: <u>1.0</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>11/13/2023</u>	
	FNL/FSL <span style="float: right;">FEL/FWL</span>
** If directional footage at Top of Prod. Zone Dist: <u>1795</u> feet Direction: <u>FNL</u> Dist: <u>2172</u> feet Direction: <u>FEL</u>	
Sec: <u>8</u> Twp: <u>4N</u> Rng: <u>64W</u>	
	FNL/FSL <span style="float: right;">FEL/FWL</span>
** If directional footage at Bottom Hole Dist: <u>1793</u> feet Direction: <u>FNL</u> Dist: <u>205</u> feet Direction: <u>FEL</u>	
Sec: <u>9</u> Twp: <u>4N</u> Rng: <u>64W</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) 06/16/2023 Date TD: 08/28/2023 Date Casing Set or D&A: 08/29/2023  
 Rig Release Date: 10/26/2023 Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD <u>14912</u> TVD** <u>6856</u> Plug Back Total Depth MD <u>14886</u> TVD** <u>6855</u>
Elevations GR <u>4779</u> KB <u>4807</u> <b>Digital Copies of ALL Logs must be Attached</b> <input checked="" type="checkbox"/>

List All Logs Run:  
CBL, MWD (DIL in 05-123-18372)

**FLUID VOLUMES USED IN DRILLING OPERATIONS**  
 (Enter "0" if a type of a fluid was not used. Do not leave blank.)  
 Total Fluids (bbls): 7324 Fresh Water (bbls): 4500  
 Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 4846

### 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
SURF	13+1/2	9+5/8	J-55	36	0	1707	750	1707	0	VISU
1ST	8+1/2	5+1/2	P-110	20	0	14899	2319	14899	2038	CBL

Bradenhead Pressure Action Threshold   512   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	3,762				
SUSSEX	4,192				
SHANNON	4,807				
SHARON SPRINGS	6,886				
NIOBRARA	7,372				

Operator Comments:

This well has not yet been completed. Anticipated date of completion is 2nd Quarter 2024.  
 Top of Productive Zone Footage is based on approved APD footage. Actual TPZ will be provided on the Form 5A.  
 Open Hole Logging Exception- no open hole logs were run; Compensated Neutron Log run on Hen 01N (API: 05-123-51800) for the Cased Hole Neutron Requirement.  
 Surface casing setting depth on the Surface Casing Cement Job Summary reports depths from the 14' RKB of the surface rig.  
 Surface casing setting depth on this Form 5 and all other supporting documents are reported from a 28.5' RKB of the production rig.  
 TOC comment from our Engineer: Top of 12.9 ppg lead, est 2007.

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

Signed: \_\_\_\_\_ Print Name:   Kim Bauer  

Title:   Regulatory Analyst II   Date:   12/22/2023   Email:   kimberlybauer@chevron.com

**ATTACHMENT LIST**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
403635253	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635256	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
403635258	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"/>
<b><u>Other Attachments</u></b>			
403634896	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635246	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635248	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635249	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635250	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
403635261	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	Permit review complete - Passed Task Updated TPZ from the Form 5A Updated Contact per Operator (PDC) Updated Registered Agent per Operator (PDC)	04/07/2025

Total: 1 comment(s)