

**FORM**  
**5**  
Rev  
09/14

**State of Colorado**  
**Oil and Gas Conservation Commission**

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



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Document Number:  
401735535

Date Received:

**DRILLING COMPLETION REPORT**

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 10459 Contact Name: Kamrin Ruder  
 Name of Operator: EXTRACTION OIL & GAS INC Phone: (720) 9747743  
 Address: 370 17TH STREET SUITE 5300 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202

API Number 05-123-40308-00 County: WELD  
 Well Name: Kennedy Well Number: 1C  
 Location: QtrQtr: NENE Section: 18 Township: 4N Range: 68W Meridian: 6  
 Footage at surface: Distance: 681 feet Direction: FNL Distance: 342 feet Direction: FEL  
 As Drilled Latitude: 40.318347 As Drilled Longitude: -105.038092

GPS Data:  
 Date of Measurement: 06/27/2018 PDOP Reading: 1.8 GPS Instrument Operator's Name: DANNY TUCKER

\*\* If directional footage at Top of Prod. Zone Dist.: 22 feet. Direction: FSL Dist.: 0 feet. Direction: FEL  
 Sec: 7 Twp: 4N Rng: 68W  
 \*\* If directional footage at Bottom Hole Dist.: 82 feet. Direction: FSL Dist.: 511 feet. Direction: FWL  
 Sec: 12 Twp: 4N Rng: 68W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 03/30/2018 Date TD: 05/30/2018 Date Casing Set or D&A: 05/30/2018  
 Rig Release Date: 06/25/2018 Per Rule 308A.b.

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

Total Depth MD 15919 TVD\*\* 5212 Plug Back Total Depth MD 15918 TVD\*\* 5212

Elevations GR 4967 KB 4992 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, MUD, MWD, (Duel Induction in API 123-40305)

**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	1,570	525	0	1,570	VISU
1ST	8+1/2	5+1/2	20	0					

## 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	
PARKMAN	1,706		NO	NO	
SUSSEX	2,264		NO	NO	
SHANNON	2,796		NO	NO	
SHARON SPRINGS	5,579		NO	NO	
NIOBRARA	5,646		NO	NO	
FORT HAYS	6,244		NO	NO	
CODELL	6,391		NO	NO	

Comment:

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.

No open hole resistivity log with gamma ray was run on this well.

The Dual Induction log ran on Kennedy 16 (123-40305)

Additional Formation Tops:

Ft Hayes:

7697-7867

15126-15204

15274-15319

Production cement report, first string depth, and first string sacks of cement will be submitted via sundry.

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

Signed: \_\_\_\_\_

Print Name: Kamrin Ruder

Title: Drilling Technician

Date: \_\_\_\_\_

Email: krunder@extractionog.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401735800	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401735801	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>Other Attachments</b>			
401735754	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401735760	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401735761	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401735786	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401735796	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)