

**FORM  
5**Rev  
02/08State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400107946

**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

1. OGCC Operator Number: 47120 4. Contact Name: Kenny Trueax  
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6383  
3. Address: P O BOX 173779 Fax: (720) 929-7383  
City: DENVER State: CO Zip: 80217-37

5. API Number 05-001-09724-00 6. County: ADAMS  
7. Well Name: TALON VIEW Well Number: 5-9  
8. Location: QtrQtr: SENW Section: 9 Township: 1S Range: 67W Meridian: 6  
Footage at surface: Direction: FNL Distance: 1469 Direction: FWL Distance: 1321  
As Drilled Latitude: 39.982383 As Drilled Longitude: -104.898600

## GPS Data:

Data of Measurement: 11/05/2010 PDOP Reading: 2.3 GPS Instrument Operator's Name: Renee Doiron

## \*\* If directional footage

at Top of Prod. Zone Distance: 1973 Direction: FNL Distance: 657 Direction: FWL  
Sec: 9 Twp: 1S Rng: 67W  
at Bottom Hole Distance: 1981 Direction: FNL Distance: 665 Direction: FWL  
Sec: 9 Twp: 1S Rng: 67W

9. Field Name: SPINDLE 10. Field Number: 77900  
11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 09/27/2010 13. Date TD: 09/30/2010 14. Date Casing Set or D&A: 10/01/2010

## 15. Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8201 TVD 8105 17 Plug Back Total Depth MD 8160 TVD 806418. Elevations GR 5157 KB 5174

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

## 19. List Electric Logs Run:

Preliminary Form 5

## 20. Casing, Liner and Cement:

### CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bot	Cement Top	Status
SURF	12+1/4	8+5/8	24#	1,326	830	0	1,326	CALC
1ST	7+7/8	4+1/2	11.6#	8,191	1,060	1,225	8,191	CALC

### ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work: \_\_\_\_\_

21. Formation log intervals and test zones:

### FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	4,614		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	5,082		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,575		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	8,019		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	8,042		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: \_\_\_\_\_

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

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

Print Name: Kenny Trueax

Title: Regulatory Analyst II

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

Email: kenny.trueax@anadarko.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

### Attachment Check List

Att Doc Num	Name	Doc Description
400108176	DIRECTIONAL SURVEY	Anadarko Talon View 5-9 Final Survey 9-30-10.pdf
400108177	CEMENT JOB SUMMARY	Talon view 5-9 Cmt Report.pdf

Total Attach: 2 Files