

FORM  
5

Rev  
02/08

State 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

DRILLING COMPLETION REPORT

Document Number:

400084331

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: 66561 4. Contact Name: Joan Proulx  
2. Name of Operator: OXY USA INC Phone: (970) 263.3641  
3. Address: PO BOX 27757 Fax: (970) 263.3694  
City: HOUSTON State: TX Zip: 77227

5. API Number 05-077-09595-00 6. County: MESA  
7. Well Name: MCDANIEL Well Number: 14-6A  
8. Location: QtrQtr: NENW Section: 14 Township: 9S Range: 94W Meridian: 6  
Footage at surface: Distance: 866 feet Direction: FNL Distance: 1785 feet Direction: FWL  
As Drilled Latitude: 39.281344 As Drilled Longitude: -107.853404

GPS Data:

Data of Measurement: 02/02/2009 PDOP Reading: 1.5 GPS Instrument Operator's Name: Matt Busker

\*\* If directional footage

at Top of Prod. Zone Distance: 1636 feet Direction: FNL Distance: 2027 feet Direction: FWL  
Sec: 14 Twp: 9S Rng: 94W  
at Bottom Hole Distance: 1675 feet Direction: FNL Distance: 2007 feet Direction: FWL  
Sec: 14 Twp: 9S Rng: 94W

9. Field Name: BRUSH CREEK 10. Field Number: 7562

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 11/26/2008 13. Date TD: 12/05/2008 14. Date Casing Set or D&A: 12/08/2008

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 7480 TVD 7412 17 Plug Back Total Depth MD 7429 TVD 7361

18. Elevations GR 7285 KB 7309

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:

Acoustic CBL  
Spectral Density/Dual Spaced Neutron/ Array compensated Resistivity  
Borehole Volume

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24+0/0	16+0/0	65	0	40	3	0	40	VISU
SURF	12+1/4	8+5/8	32	0	1,528	440	0	1,528	VISU
1ST	7+7/8	4+1/2	11.6	0	7,474	938	1,450	7,474	CBL

ADDITIONAL CEMENT

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

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	
WILLIAMS FORK	4,647	6,986	<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,986	7,286	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,286		<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: Joan Proulx

Title: Regulatory Analyst Date: 9/7/2010 Email: joan\_proulx@oxy.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: *David & Nashin* Director of COGCC Date: 2/3/2011

**Attachment Check List**

Att Doc Num	Name
400084331	FORM 5 SUBMITTED
400084339	LAS-
400084340	LAS-
400084341	LAS-CEMENT BOND
400089871	LAS-CEMENT BOND
400089872	LAS-
400090577	CEMENT JOB SUMMARY
400090578	DIRECTIONAL SURVEY

Total Attach: 8 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)