

**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:

400148724

**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: CARA MAHLER  
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6029  
3. Address: P O BOX 173779 Fax: (720) 929-7029  
City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-31591-00 6. County: WELD  
7. Well Name: DRY CREEK Well Number: 16-27  
8. Location: QtrQtr: SESE Section: 27 Township: 1N Range: 67W Meridian: 6  
Footage at surface: Distance: 1020 feet Direction: FSL Distance: 1104 feet Direction: FEL  
As Drilled Latitude: 40.017669 As Drilled Longitude: -104.871183

## GPS Data:

Data of Measurement: 12/30/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: RENEE DOIRON

\*\* If directional footage at Top of Prod. Zone Dist.: 647 feet. Direction: FSL Dist.: 663 feet. Direction: FEL  
Sec: 27 Twp: 1N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 644 feet. Direction: FSL Dist.: 657 feet. Direction: FEL  
Sec: 27 Twp: 1N Rng: 67W

9. Field Name: WATTENBERG 10. Field Number: 90750

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

12. Spud Date: (when the 1st bit hit the dirt) 12/03/2010 13. Date TD: 12/06/2010 14. Date Casing Set or D&A: 12/07/2010

## 15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 7994 TVD\*\* 7931 17 Plug Back Total Depth MD 7953 TVD\*\* 789018. Elevations GR 5044 KB 5059

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:

GR-CCL-CB-VDL, CD, CN, ML, DI-GL-GR

## 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

### 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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

PERMITTED TO THE JSND HOWEVER DURING COMPLETION THEY STOPPED AT THE CODELL AND THE LOG DOES NOT GO TO THE JSND.

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

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

Print Name: CARA MAHLER

Title: REGULATORY ANALYST

Date:

Email: CARA.MAHLER@ANADARKO.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
	317B Notification	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400142989	Access Road Map	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	CDP Conditions	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Const Layout Drawings	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400142988	Hydrology Map	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142987	Location Drawing	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142986	Location Pictures	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142993	Multi-well Plan	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142992	NRCS Map Unit Desc	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Proposed BMPs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Reference Area Map	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Reference Area Pictures	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Section 404 Permit	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Sensitive Area Data	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Sensitive Area Map	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400142985	FORM 2A SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142990	WELL LOCATION PLAT	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142991	TOPO MAP	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400142994	30 DAY NOTICE LETTER	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400145921	EXCEPTION LOC WAIVERS	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400145922	EXCEPTION LOC REQUEST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

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

Total: 0 comment(s)