IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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 **DRILLING COMPLETION REPORT**	STATE OF COLORADO OIL & GAS	DE ET OE ES Document Number: 400127052

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: Cindy Vue
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
   Phone: (720) 929-6832
3. Address: P O BOX 173779
   Fax: (720) 929-7832
   City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-32058-00
6. County: WELD
7. Well Name: WIEDEMAN   Well Number: 4-5
8. Location: QtrQtr: NENW Section: 5 Township: 5N Range: 66W Meridian: 6

Footage at surface: Distance: 1087 feet Direction: FNL Distance: 1352 feet Direction: FWL

As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:

Data of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone Dist.: 649 feet. Direction: FNL Dist.: 698 feet. Direction: FWL

Sec: 5 Twp: 5N Rng: 66W

** If directional footage at Bottom Hole Dist.: 644 feet. Direction: FNL Dist.: 702 feet. Direction: FEL

Sec: 5 Twp: 5N Rng: 66W

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) 11/27/2010   13. Date TD: 11/29/2010   14. Date Casing Set or D&A: 11/30/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7340 TVD** 7228   17 Plug Back Total Depth MD 7293 TVD** 7181

18. Elevations GR 4752 KB 4768   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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24#	0	818	520	0	818	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,326	950	700	7,326	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	
SUSSEX	4,150		☐	☐	
NIOBRARA	6,838		☐	☐	
FORT HAYS	7,136		☐	☐	
CODELL	7,159		☐	☐	

Comment:

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

Signed: _____   Print Name: Cindy Vue

Title: Regulatory Analyst II   Date: 1/25/2011   Email: Cindy.Vue@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?

Attachment Checklist

Att Doc Num	Document Name		attached ?		
400127056	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400127055	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☐	No	☒
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name		attached ?		
400127052	FORM 5 SUBMITTED	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)