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

DE	ET	OE	ES

Document Number: 400127062

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

5. API Number 05-123-32062-00
6. County: WELD
7. Well Name: WIEDEMAN
Well Number: 3-5
8. Location: QtrQtr: NENW Section: 5 Township: 5N Range: 66W Meridian: 6
Footage at surface: Distance: 1102 feet Direction: FNL Distance: 1358 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.: 626 feet. Direction: FNL Dist.: 2015 feet. Direction: FWL
Sec: 5 Twp: 5N Rng: 66W
** If directional footage at Bottom Hole Dist.: 606 feet. Direction: FNL Dist.: 2003 feet. Direction: FWL
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) 12/01/2010 13. Date TD: 12/02/2010 14. Date Casing Set or D&A: 12/03/2010

15. Well Classification:
☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7368 TVD** 7257
17 Plug Back Total Depth MD 7313 TVD** 7202

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:

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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	841	530	0	841	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,348	910	700	7,348	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	4,170		☐	☐	
NIOBRARA	6,874		☐	☐	
FORT HAYS	7,170		☐	☐	
CODELL	7,191		☐	☐	

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			
400127064	CMT Summary *	Yes ☒	No ☐
	Core Analysis	Yes ☐	No ☒
400127063	Directional Survey **	Yes ☒	No ☐
	DST Analysis	Yes ☐	No ☒
	Logs	Yes ☐	No ☒
	Other	Yes ☐	No ☒
Other Attachments			
400127062	FORM 5 SUBMITTED	Yes ☒	No ☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)