IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORM 5 Rev 02/08	State of Colorado Oil and Gas Conservation Commission	DE	ET	OE	ES

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

DRILLING COMPLETION REPORT

Document Number:

400136828

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   05-123-31592-00
6. County: WELD
7. Well Name: RURAL   Well Number: 33-31
8. Location: QtrQtr: NWSW   Section: 31   Township: 4N   Range: 65W   Meridian: 6

Footage at surface: Distance: 2535   feet   Direction: FSL   Distance: 1300   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.:   1301   feet. Direction: FSL   Dist.:   43   feet. Direction: FWL

Sec: 31   Twp: 4N   Rng: 65W

** If directional footage at Bottom Hole   Dist.:   1299   feet. Direction: FSL   Dist.:   36   feet. Direction: FWL

Sec: 31   Twp: 4N   Rng: 65W

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)   01/27/2011   13. Date TD: 01/29/2011   14. Date Casing Set or D&A: 01/30/2011

15. Well Classification:

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

16. Total Depth   MD   7781   TVD**   7461   17 Plug Back Total Depth   MD   7740   TVD**   7420

18. Elevations   GR   4878   KB   4893   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	639	440	0	639	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,771	1,011	538	7,771	CALC

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	
PARKMAN	4,078	4,328	☐	☐	
SUSSEX	4,760	4,887	☐	☐	
NIOBRARA	7,312		☐	☐	
FORT HAYS	7,602		☐	☐	
CODELL	7,623		☐	☐	

Comment:

PLAN TO COMPLETE WELL IN THE NEXT 3 MONTHS.

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: 2/25/2011   Email: Cindy.Vue@anadarko.com

Attachment Check List

Att Doc Num	Document Name		attached ?		

Attachment Checklist

Att Doc Num	Document Name		Yes		No
400136837	CMT Summary *		Yes ☒		No ☐
	Core Analysis		Yes ☐		No ☒
400136836	Directional Survey **		Yes ☒		No ☐
	DST Analysis		Yes ☐		No ☒
	Logs		Yes ☐		No ☒
	Other		Yes ☐		No ☒

Other Attachments

Att Doc Num	Document Name		Yes		No
400136828	FORM 5 SUBMITTED		Yes ☒		No ☐

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)