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

Document Number:

400185180

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-

4. Contact Name: Cindy Vue

Phone: (720) 929-6832

Fax: (720) 929-7832

5. API Number   05-123-32687-00

6. County: WELD

7. Well Name: PINNACLE   Well Number: 2-2

8. Location: QtrQtr: NENE   Section: 2   Township: 1N   Range: 68W   Meridian: 6

Footage at surface: Distance: 1059 feet Direction: FNL   Distance: 1240 feet Direction: FEL

As Drilled Latitude: 40.084810   As Drilled Longitude: -104.965633

GPS Data:

Data of Measurement: 05/03/2011   PDOP Reading: 2.3   GPS Instrument Operator's Name: Renee Doiron

** If directional footage at Top of Prod. Zone   Dist.: 661 feet. Direction: FNL   Dist.: 1815 feet. Direction: FEL

Sec: 2   Twp: 1N   Rng: 68W

** If directional footage at Bottom Hole   Dist.: 655 feet. Direction: FNL   Dist.: 1815 feet. Direction: FEL

Sec: 2   Twp: 1N   Rng: 68W

9. Field Name: SPINDLE   10. Field Number: 77900

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 03/25/2011 13. Date TD: 03/28/2011 14. Date Casing Set or D&A: 03/29/2011

15. Well Classification:

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

16. Total Depth   MD 8330   TVD** 8289   17 Plug Back Total Depth   MD 8287   TVD** 8246

18. Elevations   GR 4982   KB 4997   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:

P/E AILC-CNLD-ML-CV-TC; CBL

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	926	620	0	926	CALC
1ST	7+7/8	4+1/2	11.6#	0	8,319	240	6,650	8,319	CBL

ADDITIONAL CEMENT

Cement work date: 03/29/2011

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	5,146	610	2,322	5,350

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	4,120	4,320	☐	☐	
SUSSEX	4,616	4,760	☐	☐	
SHANNON	5,098	5,180	☐	☐	
NIOBRARA	7,439		☐	☐	
FORT HAYS	7,724		☐	☐	
CODELL	7,746		☐	☐	
J SAND	8,188		☐	☐	

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: 7/14/2011   Email: Cindy.Vue@anadarko.com

Attachment Check List

Att Doc Num	Document Name		attached ?		

Attachment Checklist

Att Doc Num	Document Name	attached ?
400185191	CMT Summary *	Yes ☒ No ☐
	Core Analysis	Yes ☐ No ☒
400185190	Directional Survey **	Yes ☒ No ☐
	DST Analysis	Yes ☐ No ☒
	Logs	Yes ☐ No ☒
	Other	Yes ☐ No ☒

Other Attachments

Att Doc Num	Document Name	attached ?
400185180	FORM 5 SUBMITTED	Yes ☒ No ☐

General Comments

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

Total: 0 comment(s)