

FORM  
5Rev  
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:

400160545

## 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: 16660

4. Contact Name: Christy Keith

2. Name of Operator: CHESAPEAKE OPERATING INC

Phone: (405) 935-7539

3. Address: P O BOX 18496

Fax: (405) 849-7539

City: OKLAHOMA CITY State: OK Zip: 73154-

5. API Number 05-103-10999-00

6. County: RIO BLANCO

7. Well Name: WRD FEDERAL

Well Number: 4-23

8. Location: QtrQtr: SESE Section: 23 Township: 2N Range: 97W Meridian: 6

Footage at surface: Distance: 781 feet Direction: FSL Distance: 903 feet Direction: FEL

As Drilled Latitude: 40.122367 As Drilled Longitude: -108.239281

## GPS Data:

Data of Measurement: 11/21/2006 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brandon Bowthorp

\*\* If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

\*\* If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WHITE RIVER

10. Field Number: 92800

11. Federal, Indian or State Lease Number: CPC62850

12. Spud Date: (when the 1st bit hit the dirt) 07/10/2007 13. Date TD: 07/27/2007 14. Date Casing Set or D&amp;A: 07/27/2007

## 15. Well Classification:

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

16. Total Depth MD 7350 TVD\*\* 17 Plug Back Total Depth MD 7256 TVD\*\*

18. Elevations GR 5960 KB 5977

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/AIT, GR/CN, L

## 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		0	1,157	210	0	1,157	CALC
1ST	7+7/8	5+1/2		0	7,352	850	4,350	7,352	CBL

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____					
Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
Details of work:					

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	
WILLIAMS FORK - CAMEO	2,742	6,361	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,361	7,340	<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	7,340		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: \_\_\_\_\_ Print Name: Christy Keith

Title: Regulatory Admin Asst Date: 4/29/2011 Email: christy.keith@chk.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2537508	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
2537509	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400160545	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date
Engineer	CBI is for another well, WRD Federal 8-26, Barbara is looking for correct CBL.	10/11/2011 3:02:28 PM
Permit	CK EMAILED ZIP FILE OF PDF CBL.	9/12/2011 10:13:31 AM
Permit	CK SENT PROD. CSG. SUMMARY; RE-REQ'D SURF CMT SUMM IF AVAILABLE BUT NOT REQ'D SINCE PRE 2/09 WELL. CK CHECKING FOR PDF OF CBL FROM HALLIBURTON.	9/9/2011 11:16:34 AM
Permit	RE-REQ'D SURF. CMT. TKT. AND PAPER CBL.	8/16/2011 10:55:29 AM
Permit	Requested Wellbore diagrams & Cement tickets.	5/10/2011 4:09:59 PM

Total: 5 comment(s)