

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:

400229683

## 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: 10255

4. Contact Name: Mark Pierce

2. Name of Operator: QUICKSILVER RESOURCES INC

Phone: (817) 665-4002

3. Address: 801 CHERRY ST - #3700 UNIT 19

Fax: (817) 665-5009

City: FT WORTH State: TX Zip: 76102

5. API Number 05-081-07656-00

6. County: MOFFAT

7. Well Name: K-Diamond Federal

Well Number: 21-21

8. Location: QtrQtr: NENW Section: 21 Township: 6N Range: 92W Meridian: 6

Footage at surface: Distance: 650 feet Direction: FNL Distance: 2047 feet Direction: FWL

As Drilled Latitude: 40.461786 As Drilled Longitude: -107.727072

## GPS Data:

Data of Measurement: 07/26/2011 PDOP Reading: 1.4 GPS Instrument Operator's Name: McCoy Anderson

\*\* 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: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: COC-64882

12. Spud Date: (when the 1st bit hit the dirt) 07/07/2011 13. Date TD: 07/15/2011 14. Date Casing Set or D&amp;A: 07/17/2011

## 15. Well Classification:

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

16. Total Depth MD 6689 TVD\*\* 17 Plug Back Total Depth MD 6600 TVD\*\*

18. Elevations GR 6306 KB 6322

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:

QUAD, COMBO OBM &amp; 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	9+5/8	36	16	1,217	419	0	1,217	CALC
1ST	8+3/4	7+0/0	26	16	5,185	405	1,400	5,185	CALC
2ND	6+1/5	4+1/2	13.5	16	6,689	165	4,000	6,689	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	
ILES	1,820		<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	4,360		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	5,178		<input type="checkbox"/>	<input type="checkbox"/>	
CARLILE	6,649		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

I will attach logs to this well when recieved.

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

Signed: \_\_\_\_\_ Print Name: Mark A Pierce

Title: Regulatory Analyst Date: 12/6/2011 Email: mpierce@qinc.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
	CMT Summary *	Yes	<input type="checkbox"/>	No	<input checked="" 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"/>

**General Comments**

User Group	Comment	Comment Date
Permit	Cement tickets attached	1/20/2012 10:12:24 AM
Permit	Missing cement ticket	1/19/2012 5:31:38 PM

Total: 2 comment(s)