

FORM
5
Rev
02/08

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:
2285323

Date Received:
10/20/2011

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: 96850 4. Contact Name: ANGELA J. NEIFERT-KRAISER
 2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 606-4398
 3. Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8285
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-18220-00 6. County: GARFIELD
 7. Well Name: GM Well Number: 21-27
 8. Location: QtrQtr: SWNE Section: 27 Township: 6S Range: 96W Meridian: 6
 Footage at surface: Distance: 2391 feet Direction: FNL Distance: 1750 feet Direction: FEL
 As Drilled Latitude: 39.495888 As Drilled Longitude: -108.091407

GPS Data:
 Data of Measurement: 09/29/2009 PDOP Reading: 1.7 GPS Instrument Operator's Name: WAYNE KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 512 feet. Direction: FNL Dist.: 1394 feet. Direction: FWL
 Sec: 27 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 521 feet. Direction: FNL Dist.: 1401 feet. Direction: FWL
 Sec: 27 Twp: 6S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290
 11. Federal, Indian or State Lease Number: CA COC46604

12. Spud Date: (when the 1st bit hit the dirt) 09/25/2010 13. Date TD: 10/03/2010 14. Date Casing Set or D&A: 10/05/2010

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

16. Total Depth MD 7960 TVD** 7048 17 Plug Back Total Depth MD 7901 TVD** 6989

18. Elevations GR 5671 KB 5695 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:
CBL AND RPM, MUD

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
CONDUCTOR	24	18		0	85	32	0	85	VISU
SURF	13+1/2	9+5/8		0	1,349	340	0	1,329	VISU
1ST	7+7/8	4+1/2		0	7,942	995	3,390	7,942	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	
WASATCH G	3,766		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	4,696		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,499		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,952		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORMATION LOG INTERVALS AND TEST ZONES COMMENTS: SURFACE PRESSURE = 0#
FORM 5A DOC #2285326

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

Signed: _____ Print Name: ANGELA J. NEIFERT-KRAISER

Title: REGULATORY Date: 10/11/2011 Email: ANGELA.NEIFERT-KRAISER@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2285325	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2285324	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input 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"/>
Other Attachments			
2285323	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	off hold--3/10/11 HDIL/CZ-D/CNL/GRL 2548402. Rec'd all LAS logs.	4/12/2012 7:52:25 AM
Permit	MISSING RPM HARD COPY - NOT REQ PER J.S., REQ MWD/FMI LOGS	11/28/2011 8:41:11 AM

Total: 2 comment(s)