

Document Number:  
2286721

Date Received:  
01/03/2012

**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 NEIFER-KRAISER

2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC      Phone: (303) 606-4398

3. Address: 1001 17TH STREET - SUITE #1200      Fax: (303) 629-8272

City: DENVER      State: CO      Zip: 80202

5. API Number 05-045-18111-00      6. County: GARFIELD

7. Well Name: FEDERAL      Well Number: PA 432-20

8. Location: QtrQtr: NENE      Section: 20      Township: 6S      Range: 95W      Meridian: 6

Footage at surface: Distance: 1316 feet      Direction: FNL      Distance: 810 feet      Direction: FEL

As Drilled Latitude: 39.514044      As Drilled Longitude: -108.015965

GPS Data:  
Data of Measurement: 02/16/2010      PDOP Reading: 2.5      GPS Instrument Operator's Name: JACK KIRKPATRICK

\*\* If directional footage at Top of Prod. Zone      Dist.: 2203 feet. Direction: FNL      Dist.: 2064 feet. Direction: FEL

Sec: 20      Twp: 6S      Rng: 95W

\*\* If directional footage at Bottom Hole      Dist.: 2188 feet. Direction: FNL      Dist.: 2084 feet. Direction: FEL

Sec: 20      Twp: 6S      Rng: 95W

9. Field Name: PARACHUTE      10. Field Number: 67350

11. Federal, Indian or State Lease Number: COC62161

12. Spud Date: (when the 1st bit hit the dirt) 11/14/2010      13. Date TD: 11/24/2010      14. Date Casing Set or D&A: 11/26/2010

15. Well Classification:

Dry     Oil     Gas/Coalbed     Disposal     Stratigraphic     Enhanced Recovery     Storage     Observation

16. Total Depth MD 9061      TVD\*\* 8860      17 Plug Back Total Depth MD 9008      TVD\*\* 8807

18. Elevations GR 6426      KB 6452      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 RESERVOIR PERFORMANCE MONITOR (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	62	25	0	62	VISU
SURF	13+1/2	9+5/8		0	1,034	300	0	1,034	VISU
1ST	8+3/4	4+1/2		0	9,044	975	4,370	9,044	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	3,290		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	5,530		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	8,210		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,907		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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 SPECIALIST Date: 11/30/2011 Email: ANGELA.NEIFERT-KRAISER@WILLIAMS.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
2286723	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2286722	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"/>
<b>Other Attachments</b>			
2286721	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400276270	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	off hold--uploaded dir. template. approved form 5 w/out paper RPM; oper. submitting soon. Have all LAS logs	4/24/2012 3:27:11 PM
Permit	req'd dir. template.	4/18/2012 1:11:20 PM
Permit	Added mud to list of logs Corrected formation name Missing directional template	2/8/2012 10:39:35 AM

Total: 3 comment(s)