

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



DE ET OE ES

Document Number:

2287589

Date Received:

02/24/2012

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 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 05-045-19747-00 6. County: GARFIELD
7. Well Name: ExxonMobil Well Number: GM 312-27
8. Location: QtrQtr: SESW Section: 27 Township: 6S Range: 96W Meridian: 6
Footage at surface: Distance: 1149 feet Direction: FSL Distance: 2486 feet Direction: FWL
As Drilled Latitude: 39.491084 As Drilled Longitude: -108.095276

GPS Data:
Data of Measurement: 11/01/2010 PDOP Reading: 3.5 GPS Instrument Operator's Name: JACK KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 2073 feet. Direction: FNL Dist.: 509 feet. Direction: FWL
Sec: 27 Twp: 6S Rng: 96W
** If directional footage at Bottom Hole Dist.: 2070 feet. Direction: FNL Dist.: 498 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: COC 027743

12. Spud Date: (when the 1st bit hit the dirt) 05/28/2011 13. Date TD: 06/02/2011 14. Date Casing Set or D&A: 06/03/2011

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

16. Total Depth MD 7938 TVD** 7007 17 Plug Back Total Depth MD 7888 TVD** 6957

18. Elevations GR 5604 KB 5628 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	26	18		0	85	41	0	85	VISU
SURF	13+1/2	9+5/8		0	1,350	340	0	1,350	VISU
1ST	7+7/8	4+1/2		0	7,918	995	3,620	7,918	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	2,434		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	4,705		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,369		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,817		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORMATION LOG INTERVALS AND TEST ZONES COMMENTS: SURFACE PRESSURE = 0#

FORM 5A DPC# 2287587

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: 1/24/2012

Email: ANGELA.NEIFERT-KRAISER@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2287591	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2287590	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			
2287589	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400275562	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	added MUD to list of logs. all LAS logs rec'd. approved form 5 without paper RPM log. WPX submitting soon.	4/23/2012 2:23:39 PM

Total: 1 comment(s)