

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:
2287574

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 05-045-20094-00 6. County: GARFIELD

7. Well Name: ExxonMobil Well Number: GM 531-34

8. Location: QtrQtr: NWNE Section: 34 Township: 6S Range: 96W Meridian: 6

Footage at surface: Distance: 1089 feet Direction: FNL Distance: 2211 feet Direction: FEL

As Drilled Latitude: 39.484951 As Drilled Longitude: -108.093007

GPS Data:
Data of Measurement: 12/07/2010 PDOP Reading: 2.6 GPS Instrument Operator's Name: JACK KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 826 feet. Direction: FNL Dist.: 2058 feet. Direction: FEL

Sec: 34 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 843 feet. Direction: FNL Dist.: 2049 feet. Direction: FEL

Sec: 34 Twp: 6S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 05/12/2011 13. Date TD: 05/17/2011 14. Date Casing Set or D&A: 05/18/2011

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

16. Total Depth MD 6930 TVD** 6911 17 Plug Back Total Depth MD 6881 TVD** 6862

18. Elevations GR 5598 KB 5624 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	44	17	0	44	VISU
SURF	13+1/2	9+5/8		0	736	200	0	736	VISU
1ST	7+7/8	4+1/2		0	6,916	995	3,110	6,916	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	1,985		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	3,735		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,394		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,825		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 5A DOC#2287572

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

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: 1/19/2012

Email: ANGELA.NEIFERT-KRAISER@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2287576	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2287575	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			
2287574	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400275576	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
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 2:37:37 PM

Total: 1 comment(s)