

FORM
5Rev
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:

2286161

Date Received:

11/22/2011

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: MATT BARBER

2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Phone: (303) 606-4385

3. Address: 1001 17TH STREET - SUITE #1200

Fax: (303) 629-8268

City: DENVER State: CO Zip: 80202

5. API Number 05-045-17797-00

6. County: GARFIELD

7. Well Name: Jolley

Well Number: KP 522-21

8. Location: QtrQtr: SENW Section: 21 Township: 6S Range: 91W Meridian: 6

Footage at surface: Distance: 1927 feet Direction: FNL Distance: 2215 feet Direction: FWL

As Drilled Latitude: 39.515447 As Drilled Longitude: -107.560927

GPS Data:

Date of Measurement: 08/30/2010 PDOP Reading: 1.7 GPS Instrument Operator's Name: J. KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 2559 feet. Direction: FNL Dist.: 1995 feet. Direction: FWL

Sec: 21 Twp: 6S Rng: 91W

** If directional footage at Bottom Hole Dist.: 2553 feet. Direction: FNL Dist.: 1996 feet. Direction: FWL

Sec: 21 Twp: 6S Rng: 91W

9. Field Name: MAMM CREEK

10. Field Number: 52500

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 01/01/2011 13. Date TD: 01/09/2011 14. Date Casing Set or D&A: 01/10/2011

15. Well Classification:

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

16. Total Depth MD 7905 TVD** 7858 17 Plug Back Total Depth MD 7857 TVD** 7810

18. Elevations GR 6889 KB 6912

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:

SP/GR/HDIL/ZDL/CN AND CBL
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	125	34	0	125	VISU
SURF	13+1/2	9+5/8		0	937	285	0	937	VISU
1ST	8+3/4	4+1/2		0	7,880	1,155	3,230	7,880	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	
MESAVERDE	4,218		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,519		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,795		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 5A DOC#2286164

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

Signed: _____

Print Name: MATT BARBER

Title: SR. REGULATORY SPECIALIST

Date: 11/17/2011

Email: MATT.BARBER@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2286163	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2286162	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"/>
<u>Other Attachments</u>					
2286161	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	1/12/11 T-COMBO/IND/DEN/NEUT 1907835 MUD LOG 1907842 1/20/11 DW RAB 1672627. Rec'd all LAS logs. 8/26/2011	4/12/2012 7:41:58 AM
Permit	Added mud to list of logs Missing paper copy of bond log	1/17/2012 5:54:06 PM
Data Entry	CHECK #19 LIST ELECTRIC LOGS RUN - CONFLICTING INFORMATION GIVEN BY OPERATOR.	12/28/2011 3:32:47 PM

Total: 3 comment(s)