

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:

2286502

Date Received:

12/12/2011

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: SANDRA SALAZAR
 2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 629-8456
 3. Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-19731-00 6. County: GARFIELD
 7. Well Name: ExxonMobil Well Number: GM 523-27
 8. Location: QtrQtr: SESW Section: 27 Township: 6S Range: 96W Meridian: 6
 Footage at surface: Distance: 1140 feet Direction: FSL Distance: 2531 feet Direction: FWL
 As Drilled Latitude: 39.491061 As Drilled Longitude: -108.095116

GPS Data:

Date 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.: 1822 feet. Direction: FSL Dist.: 2632 feet. Direction: FWL

Sec: 27 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 1805 feet. Direction: FSL Dist.: 2652 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 034553A

12. Spud Date: (when the 1st bit hit the dirt) 03/28/2011 13. Date TD: 04/02/2011 14. Date Casing Set or D&A: 04/02/2011

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 7080 TVD** 7028 17 Plug Back Total Depth MD 7021 TVD** 6969

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:

SP/GR.HDIL/ZDL/CN/RPM AND CBL

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	0	65	41	0	65	VISU
SURF	13+1/2	9+5/8	0	0	727	225	0	727	VISU
1ST	7+7/8	4+1/2	0	0	7,054	992	2,590	7,054	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	2,069		<input type="checkbox"/>	<input type="checkbox"/>	SURFACE PRESSURE =0#
MESAVERDE	3,840		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,471		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,955		<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: SANDRA SALAZAR

Title: PERMIT TECHNICIAN II Date: 11/29/2011 Email: SANDRA.SALAZAR@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2286504	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2286503	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			
2286502	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	LAS logs rec'd 1/25/2012	4/12/2012 7:29:23 AM
Permit	Missing digital logs	1/23/2012 4:39:41 PM

Total: 2 comment(s)