

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:

2286994

Date Received:

01/17/2012

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: 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 05-045-20220-00

6. County: GARFIELD

7. Well Name: ExxonMobil

Well Number: GM 544-22

8. Location: QtrQtr: LOT1 Section: 27 Township: 6S Range: 96W Meridian: 6

Footage at surface: Distance: 983 feet Direction: FNL Distance: 709 feet Direction: FEL

As Drilled Latitude: 39.499755 As Drilled Longitude: -108.087718

GPS Data:

Data of Measurement: 03/01/2011 PDOP Reading: 5.2 GPS Instrument Operator's Name: JACK KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 261 feet. Direction: FSL Dist.: 669 feet. Direction: FEL

Sec: 22 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 264 feet. Direction: FSL Dist.: 647 feet. Direction: FEL

Sec: 22 Twp: 6S Rng: 96W

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number: COC34553

12. Spud Date: (when the 1st bit hit the dirt) 06/10/2011 13. Date TD: 06/16/2011 14. Date Casing Set or D&A: 06/17/2011

15. Well Classification:

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

16. Total Depth MD 7485 TVD** 7306 17 Plug Back Total Depth MD 7437 TVD** 7258

18. Elevations GR 5770 KB 5794

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:

RPM 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	88	33	0	88	VISU
SURF	13+1/2	9+5/8		0	1,026	260	0	1,026	VISU
1ST	7+7/8	4+1/2		0	7,468	995	2,708	7,468	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	2,330		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	4,276		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,921		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,373		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

FORM 5A DOC# 2286992

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: PERMITTING

Date: 12/30/2011

Email: SANDRA.SALAZAR@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2286996	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2286995	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>					
2286994	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400276958	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	off hold--uploaded dir. template. all LAS logs rec'd. approved form 5 w/out paper RPM; WPX submitting soon.	4/26/2012 7:09:49 AM
Permit	on hold pending receipt of corrected dir. template. need paper RPM and LAS logs.	4/19/2012 12:02:30 PM
Permit	Not reviewed, missing directional template	2/15/2012 2:57:39 PM

Total: 3 comment(s)