FORM 5	State of Colorado		DE	ET	OE	ES

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

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number:

1884346

Date Received:

05/23/2008

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 [X] Final completion [ ] Preliminary completion

1. OGCC Operator Number: 96850
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC
3. Address: 1001 17TH STREET - SUITE #1200
   City: DENVER State: CO Zip: 80202

4. Contact Name: ANGELA NEIFERT
   Phone: (303) 572-3900
   Fax: (303) 629-8265

5. API Number: 05-045-14467-00
6. County: GARFIELD
7. Well Name: WILLIAMS Well Number: GM 411-1
8. Location: QtrQtr: NWNW Section: 1 Township: 7S Range: 96W Meridian: 6

Footage at surface: Distance: 430 feet Direction: FNL Distance: 543 feet Direction: FWL

As Drilled Latitude: 39.472072 As Drilled Longitude: -108.064907

GPS Data:

Data of Measurement: 03/03/2008 PDOP Reading: 3.0 GPS Instrument Operator's Name: LAUREN VANCE

** If directional footage at Top of Prod. Zone Dist.: 132 feet. Direction: FNL Dist.: 228 feet. Direction: FWL

Sec: 1 Twp: 7S Rng: 96W

** If directional footage at Bottom Hole Dist.: 126 feet. Direction: FNL Dist.: 211 feet. Direction: FWL

Sec: 1 Twp: 7S 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) 10/05/2007 13. Date TD: 10/12/2007 14. Date Casing Set or D&A: 10/13/2007

15. Well Classification:

[ ] Dry [ ] Oil [X] Gas/Coalbed [ ] Disposal [ ] Stratigraphic [ ] Enhanced Recovery [ ] Storage [ ] Observation

16. Total Depth MD 6868 TVD** 6867 17 Plug Back Total Depth MD 6821 TVD** 6820

18. Elevations GR 5543 KB 5558 | 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; RMTE; 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	45	25	0	45	CALC
SURF	13+1/2	9+5/8		0	1,117	315	0	1,117	CALC
1ST	7+7/8	4+1/2		0	6,845	837	2,690	6,845	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf 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	1,865		☐	☐	SURFACE PRESSURE = 0#
MESAVERDE	3,758		☐	☐	
CAMEO	6,222		☐	☐	
ROLLINS	6,767		☐	☐	

Comment:

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

Signed: Y _____   Print Name: ANGELA.NEIFERT

Title: PERMIT TECH _____   Date: _____ 5/21/2008 _____   Email: ANGELA.NEIFERT@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
	CMT Summary *	Yes ☐ No ☒
	Core Analysis	Yes ☐ No ☒
1773105	Directional Survey **	Yes ☒ No ☐
	DST Analysis	Yes ☐ No ☒
	Logs	Yes ☐ No ☒
	Other	Yes ☐ No ☒

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)