| 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 | Document Number:
400302062

Date Received: |

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: 96155
2. Name of Operator: WHITING OIL AND GAS CORPORATION
3. Address: 1700 BROADWAY STE 2300
   City: DENVER   State: CO   Zip: 80290

4. Contact Name: Pauleen Tobin
   Phone: (303) 837-1661
   Fax: (303) 390-4923

5. API Number: 05-123-34749-00
6. County: WELD
7. Well Name: Wildhorse   Well Number: 16-42H
8. Location: QtrQtr: SWSW   Section: 16   Township: 9N   Range: 59W   Meridian: 6
   Footage at surface: Distance: 330 feet Direction: FSL   Distance: 660 feet Direction: FWL
   As Drilled Latitude: 40.744103   As Drilled Longitude: -103.990206

GPS Data:
   Data of Measurement: 01/24/2012   PDOP Reading: 2.7   GPS Instrument Operator's Name: Larry D Brown

   ** If directional footage at Top of Prod. Zone   Dist.: 814 feet. Direction: FSL   Dist.: 1318 feet. Direction: FWL
   Sec: 16   Twp: 9   Rng: 59
   ** If directional footage at Bottom Hole   Dist.: 2199 feet. Direction: FNL   Dist.: 597 feet. Direction: FEL
   Sec: 16   Twp: 9   Rng: 59

9. Field Name: WILDCAT   10. Field Number: 99999
11. Federal, Indian or State Lease Number: 8435.5

12. Spud Date: (when the 1st bit hit the dirt) 01/04/2012   13. Date TD: 01/13/2012   14. Date Casing Set or D&A: 01/17/2012

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

16. Total Depth   MD 10864   TVD** 6215   17 Plug Back Total Depth   MD 10864   TVD** 6215

18. Elevations   GR 5007   KB 5022   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:
AI, CPD/CND, MI,; GR/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
SURF	13+1/2	9+5/8	36	0	1,538	670	0	1,538	CALC
1ST	8+3/4	7	29	0	6,652	455	110	6,652	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	
FOX HILLS	1,542		☐	☐	
PIERRE	1,694		☐	☐	
HYGIENE	3,443		☐	☐	
SHARON SPRINGS	6,117		☐	☐	
NIOBRARA	6,145		☐	☐	

Comment:

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

Signed: _____   Print Name: PAULEEN TOBIN

Title: ENGINEER TECH   Date: _____   Email: POLLYT@WHITING.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name	Yes		No	
400302073	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400302072	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name	Yes		No	
400302069	LAS-TRIPLE COMBINATION	Yes	☒	No	☐
400302070	PDF-CBL 1ST RUN	Yes	☒	No	☐
400302076	DIRECTIONAL DATA	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)