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:

400324794

Date Received:

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: 47120

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

3. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

4. Contact Name: JOEL MALEFYT

Phone: (720) 929-6828

Fax: (720) 929-7828

5. API Number 05-123-33815-00

6. County: WELD

7. Well Name: DACONO Well Number: 3-2

8. Location: QtrQtr: SENW Section: 2 Township: 1N Range: 68W Meridian: 6

Footage at surface: Distance: 2028 feet Direction: FNL Distance: 1861 feet Direction: FWL

As Drilled Latitude: 40.082117 As Drilled Longitude: -104.973284

GPS Data:

Data of Measurement: 04/17/2012 PDOP Reading: 1.2 GPS Instrument Operator's Name: Renee Doiron

** If directional footage at Top of Prod. Zone Dist.: 659 feet. Direction: FNL Dist.: 1988 feet. Direction: FWL

Sec: 2 Twp: 1N Rng: 68W

** If directional footage at Bottom Hole Dist.: 645 feet. Direction: FNL Dist.: 1995 feet. Direction: FWL

Sec: 2 Twp: 1N Rng: 68W

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 02/02/2012 13. Date TD: 02/05/2012 14. Date Casing Set or D&A: 02/07/2012

15. Well Classification:

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

16. Total Depth MD 8450 TVD** 8306 17 Plug Back Total Depth MD 8395 TVD** 8251

18. Elevations GR 5015 KB 5030 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:

P/E AILC-CNLD-ML-TC-CV; 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	12+1/4	8+5/8	24#	0	990	620	15	990	CALC
1ST	7+7/8	4+1/2	11.6#	0	8,441	66	8,087	8,441	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:	02/07/2012					
Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	8,065	1,013	566	8,065
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	
PARKMAN	4,213		☐	☐	
SUSSEX	4,588	4,898	☐	☐	
SHANNON	5,200	5,221	☐	☐	
NIOBRARA	7,576		☐	☐	
CODELL	7,881		☐	☐	
J SAND	8,312		☐	☐	

Comment:

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

Signed: _____   Print Name: JOEL MALEFYT

Title: REGULATORY ANALYST   Date: _____   Email: JOEL.MALEFYT@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
400324810	CMT Summary *	Yes ☒ No ☐
	Core Analysis	Yes ☐ No ☒
400324809	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)