

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:
400331610

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: 96850 4. Contact Name: Angela Neifert-Kraiser
 2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 606-4398
 3. Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-16341-00 6. County: GARFIELD
 7. Well Name: PUCKETT Well Number: GM 522-6
 8. Location: QtrQtr: SWNW Section: 6 Township: 7S Range: 96W Meridian: 6
 Footage at surface: Distance: 1339 feet Direction: FNL Distance: 1229 feet Direction: FWL
 As Drilled Latitude: 39.469484 As Drilled Longitude: -108.154899

GPS Data:
 Date of Measurement: 10/02/2008 PDOP Reading: 2.3 GPS Instrument Operator's Name: Jack Kirkpatrick

** If directional footage at Top of Prod. Zone Dist.: 2331 feet. Direction: FNL Dist.: 1556 feet. Direction: FWL
 Sec: 6 Twp: 6s Rng: 96w
 ** If directional footage at Bottom Hole Dist.: 2343 feet. Direction: FNL Dist.: 1538 feet. Direction: FWL
 Sec: 6 Twp: 6s 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) 10/26/2008 13. Date TD: 11/02/2008 14. Date Casing Set or D&A: 11/03/2008

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

16. Total Depth MD 7016 TVD** 6888 17 Plug Back Total Depth MD 6928 TVD** 6800

18. Elevations GR 6398 KB 6424 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:
High Resolution Induction, Spectral Density, Dual Spaced Neutron CBL; Reservoir Monitor Tool Elite

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	48	0	45	25	0	45	VISU
SURF	14+3/4	10+3/4	32.3	0	763	225	0	763	VISU
1ST	7+7/8	4+1/2	11.6	0	7,001	730	3,103	7,001	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 06/07/2012

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	5,190	30	5,190	5,447
SQUEEZE	1ST	5,445	50	5,190	5,447

Details of work:

Work Performed 6/12/2012
 MIRU, POOH, Set plug at 5,540', PT plug, pressure test previously squeezed MV3 perfs, PT failed, remediate with 15.8 Class G cement, Drill out cement, retrieve plug, SN lowered from 6,641' to 6,675'.

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	2,529		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	3,984		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,319		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,887		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Please note: the "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

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

Signed: _____ Print Name: Angela Neifert-Kraiser

Title: Regulatory Specialist Date: _____ Email: angela.neifert-kraiser@wpenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400331632	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400331634	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"/>
400331629	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other Attachments			
400331630	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400331637	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)