

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



DE ET OE ES

Document Number:

2172746

Date Received:

10/25/2012

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: 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: SCOTT WEBB  
Phone: (303) 390-4095  
Fax: (303) 390-4943

5. API Number 05-103-11931-00  
6. County: RIO BLANCO  
7. Well Name: WRD  
Well Number: 23-33-R  
8. Location: QtrQtr: NESW Section: 33 Township: 2N Range: 97W Meridian: 6  
Footage at surface: Distance: 1925 feet Direction: FSL Distance: 2187 feet Direction: FWL  
As Drilled Latitude: 40.096553 As Drilled Longitude: -108.284869

GPS Data:  
Date of Measurement: 07/30/2010 PDOP Reading: 1.2 GPS Instrument Operator's Name: B.H.

\*\* If directional footage at Top of Prod. Zone Dist.: 2614 feet. Direction: FNL Dist.: 2256 feet. Direction: FWL  
Sec: 33 Twp: 2N Rng: 97W

\*\* If directional footage at Bottom Hole Dist.: 2445 feet. Direction: FNL Dist.: 2358 feet. Direction: FWL  
Sec: 33 Twp: 2N Rng: 97W

9. Field Name: WHITE RIVER 10. Field Number: 92800  
11. Federal, Indian or State Lease Number: COC45291

12. Spud Date: (when the 1st bit hit the dirt) 06/17/2012 13. Date TD: 08/17/2012 14. Date Casing Set or D&A: 08/03/2012

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

16. Total Depth MD 15923 TVD\*\* 15897 17 Plug Back Total Depth MD 13685 TVD\*\* 13637

18. Elevations GR 6168 KB 6203  
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:  
LOGGING TOOLS STUCK IN HOLE

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	20		0	100	9	0	100	CALC
SURF	17+1/2	13+3/8		0	4,200	1,720	0	4,200	CALC
1ST	12+1/4	9+5/8		0	10,171	1,730	6,450	10,171	CBL
1ST LINER	8+1/2	7		9872	13,340	450	9,870	13,340	CALC

**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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

GPS DATA WILL BE FORTHCOMING AND WILL BE REPORTED ON A FORM 4 SUNDRY NOTICE.

TOC FOR PLUG ACK DEPTH WAS FOR PREPARATION TO SIDETRACK WELL

FORM 5 FOR PAED 1ST DRILL PAED WELLBORE  
WELL WAS SIDETRACKED DUE TO FISH-IN-HOLE

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

Signed: \_\_\_\_\_ Print Name: SCOTT M. WEBB

Title: REGULATORY Date: 10/16/2012 Email: SCOTTW@WHITING.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
2172747	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2172748	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"/>
2172749	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b><u>Other Attachments</u></b>			
2172746	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400342564	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400342566	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>
Agency	This Form 5 is for original hole before sidetrack. Correspondence document # 2171255 verifies TMD of original hole when logging tools were lost in hole.	11/28/2012 10:32:29 AM
Permit	off hold; uploaded dir. template. No logs run.	11/2/2012 11:06:40 AM
Permit	on hold; need dir. template	11/2/2012 7:00:05 AM

Total: 3 comment(s)