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

Document Number: 400349670

Date Received: 11/26/2012

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

4. Contact Name: Emily Carrender

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

Phone: (720) 929-6282

3. Address: P O BOX 173779

Fax: (720) 929-7282

City: DENVER   State: CO   Zip: 80217-

5. API Number   05-123-35193-00

6. County: WELD

7. Well Name: XCEL   Well Number: 35-27

8. Location: QtrQtr: SWSW   Section: 27   Township: 1N   Range: 67W   Meridian: 6

Footage at surface: Distance: 561 feet Direction: FSL   Distance: 676 feet Direction: FWL

As Drilled Latitude: _____   As Drilled Longitude: _____

GPS Data:

Data of Measurement: _____   PDOP Reading: ____   GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone   Dist.: 66 feet. Direction: FSL   Dist.: 1314 feet. Direction: FWL

Sec: 27   Twp: 1N   Rng: 67W

** If directional footage at Bottom Hole   Dist.: 64 feet. Direction: FSL   Dist.: 1319 feet. Direction: FWL

Sec: 27   Twp: 1N   Rng: 67W

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) 11/15/2012   13. Date TD: 11/18/2012   14. Date Casing Set or D&A: 11/19/2012

15. Well Classification:

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

16. Total Depth MD 8025   TVD** 7930   17 Plug Back Total Depth MD ____   TVD** ____

18. Elevations GR 5028   KB 5043

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:

PRE FORM 5

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	0	1,188	760	15	1,188	CALC
1ST	7+7/8	4+1/2	11.6	0	7,994	970	965	7,994	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	
PARKMAN	3,958		☐	☐	
SUSSEX	4,889		☐	☐	
NIOBRARA	7,403		☐	☐	
CODELL	7,823		☐	☐	

Comment:

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

Signed: _____   Print Name: Emily Carrender

Title: Regulatory Specialist I   Date: 11/26/2012   Email: emily.carrender@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name		attached ?		
400349680	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400349681	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☐	No	☒
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name		attached ?		
400349670	FORM 5 SUBMITTED	Yes	☒	No	☐
400349683	DIRECTIONAL DATA	Yes	☒	No	☐

General Comments

User Group	**Comment**	**Comment Date**
Permit	Corrected 1st string casing setting depth to 7994' per operator.	2/20/2013 9:58:15 AM
Permit	Questioned operator on casing depth of 6929'. Otherwise ready to pass.	2/20/2013 9:39:06 AM

Total: 2 comment(s)