

FORM
5Rev
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:

400510216

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: 47120

4. Contact Name: Katie Kistner

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

Phone: (720) 9294317

3. Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-36231-00

6. County: WELD

7. Well Name: GITTLEIN

Well Number: 3C-28HZ

8. Location: QtrQtr: SESW Section: 33 Township: 2N Range: 65W Meridian: 6

Footage at surface: Distance: 207 feet Direction: FSL Distance: 2087 feet Direction: FWL

As Drilled Latitude: 40.088394 As Drilled Longitude: -104.670818

GPS Data:

Data of Measurement: 09/09/2013 PDOP Reading: 1.5 GPS Instrument Operator's Name: Renee Doiron

** If directional footage at Top of Prod. Zone Dist.: 354 feet. Direction: FSL Dist.: 2280 feet. Direction: FWL

Sec: 33 Twp: 2N Rng: 65W

** If directional footage at Bottom Hole Dist.: 2166 feet. Direction: FSL Dist.: 2358 feet. Direction: FWL

Sec: 28 Twp: 2N Rng: 65W

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) 09/03/2013 13. Date TD: 10/09/2013 14. Date Casing Set or D&A: 10/11/2013

15. Well Classification:

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

16. Total Depth MD 14456 TVD** 7283 17 Plug Back Total Depth MD 14398 TVD** 7283

18. Elevations GR 4911 KB 4936

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:

CBL, GR, RES, MUD

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	1,336	473	0	1,336	VISU
1ST	8+3/4	7	26	0	7,389	750	150	7,389	CBL
1ST LINER	6+1/8	4+1/2	11.6	6588	14,446	510	6,588	14,446	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	
SHARON SPRINGS	6,925		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	6,960		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,367		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,526		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Kerr McGee landed the 7" casing 105' shy of the planned spacing. Kerr McGee will run a cemented liner and only perf within the spacing unit.

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.

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

Signed: _____

Print Name: Katie Kistner

Title: Regulatory Analyst

Date:

Email: katie.kistner@anadarko.com**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400523494	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400510297	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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400510268	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400510269	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400510270	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400510272	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400510293	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400510296	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400524970	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)