

FORM
5

Rev
02/08

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

State of Colorado

Oil and Gas Conservation Commission



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Document Number:

400555721

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 05-123-36866-00 6. County: WELD
 7. Well Name: THOMSEN Well Number: 34C-18HZ
 8. Location: QtrQtr: SWNW Section: 7 Township: 2N Range: 65W Meridian: 6
 Footage at surface: Distance: 2397 feet Direction: FNL Distance: 460 feet Direction: FWL
 As Drilled Latitude: 40.153618 As Drilled Longitude: -104.714231

GPS Data:

Data of Measurement: 06/06/2013 PDOP Reading: 2.3 GPS Instrument Operator's Name: Renee Doiron

** If directional footage at Top of Prod. Zone Dist.: 3229 feet. Direction: FNL Dist.: 221 feet. Direction: FEL

Sec: 7 Twp: 2N Rng: 65W

** If directional footage at Bottom Hole Dist.: 492 feet. Direction: FSL Dist.: 175 feet. Direction: FEL

Sec: 18 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) 03/14/2013 13. Date TD: 04/17/2013 14. Date Casing Set or D&A: 04/21/2013

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 14675 TVD** 7371 17 Plug Back Total Depth MD 14571 TVD** 7371

18. Elevations GR 4946 KB 4971

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, MUD, RES

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	970	350	0	970	VISU
1ST	8+3/4	7	26	0	7,806	800	0	7,806	CBL
1ST LINER	6+1/8	4+1/2	11.6	6648	14,665	416	6,647	14,665	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	7,150		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,246		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,642		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,790		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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 ?	
Attachment Checklist			
400555754	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400555753	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"/>
Other Attachments			
400555731	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400555741	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400555743	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400555746	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400555748	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400555752	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)