

Document Number:
 400563346

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 05-103-11784-00 6. County: RIO BLANCO
 7. Well Name: Federal Well Number: RGU 513-23-198
 8. Location: QtrQtr: NESW Section: 23 Township: 1S Range: 98W Meridian: 6
 Footage at surface: Distance: 1782 feet Direction: FSL Distance: 1911 feet Direction: FWL
 As Drilled Latitude: 39.946778 As Drilled Longitude: -108.362636

GPS Data:
 Date of Measurement: 02/12/2013 PDOP Reading: 2.2 GPS Instrument Operator's Name: J. KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 1546 feet. Direction: FSL Dist.: 650 feet. Direction: FWL
 Sec: 23 Twp: 1s Rng: 98w
 ** If directional footage at Bottom Hole Dist.: 1540 feet. Direction: FSL Dist.: 624 feet. Direction: FWL
 Sec: 23 Twp: 1s Rng: 98w

9. Field Name: SULPHUR CREEK 10. Field Number: 80090
 11. Federal, Indian or State Lease Number: COC60732

12. Spud Date: (when the 1st bit hit the dirt) 04/16/2013 13. Date TD: 05/27/2013 14. Date Casing Set or D&A: 05/28/2013

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

16. Total Depth MD 12527 TVD** 12394 17 Plug Back Total Depth MD 12492 TVD** 12359

18. Elevations GR 6543 KB 6564
 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:
SP/GR/HDIL/ZDL/CN/MUD and CBL
Log have been submitted on the COGCC website 6/20/13

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	30	26	48	0	84	31	0	84	VISU
SURF	14+3/4	9+5/8	36	0	3,863	1,940	0	3,863	VISU
1ST	8+3/4	4+1/2	11.6	0	12,517	1,690	6,075	12,517	CBL

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	
WASATCH	3,398		<input type="checkbox"/>	<input type="checkbox"/>	
WASATCH G	5,964		<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	6,072		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	7,740		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	10,711		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	11,300		<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	11,429		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	11,652		<input type="checkbox"/>	<input type="checkbox"/>	
SEGO	12,033		<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			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400563469	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"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
400563466	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group **Comment** **Comment Date**

--	--	--

Total: 0 comment(s)