

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



DE ET OE ES

Document Number:

400568939

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: 2800

4. Contact Name: KENNY TRUEAX

2. Name of Operator: ANADARKO E&P ONSHORE LLC

Phone: (720) 929-6383

3. Address: PO BOX 173779

Fax: (720) 929-6383

City: DENVER State: CO Zip: 80217-

5. API Number 05-017-07777-00

6. County: CHEYENNE

7. Well Name: Switchman

Well Number: 1647-17-11H

8. Location: QtrQtr: SWSW Section: 17 Township: 16S Range: 47W Meridian: 6

Footage at surface: Distance: 350 feet Direction: FSL Distance: 600 feet Direction: FWL

As Drilled Latitude: 38.658070 As Drilled Longitude: -102.711519

GPS Data:

Data of Measurement: 02/27/2014 PDOP Reading: 3.3 GPS Instrument Operator's Name: Travis Holland

** If directional footage at Top of Prod. Zone Dist.: 1123 feet. Direction: FSL Dist.: 718 feet. Direction: FWL

Sec: 17 Twp: 16S Rng: 74W

** If directional footage at Bottom Hole Dist.: 652 feet. Direction: FNL Dist.: 699 feet. Direction: FWL

Sec: 17 Twp: 16S Rng: 74W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 01/06/2014 13. Date TD: 01/23/2014 14. Date Casing Set or D&A: 01/26/2014

15. Well Classification:

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

16. Total Depth MD 9230 TVD** 5299 17 Plug Back Total Depth MD 9205 TVD** 5300

18. Elevations GR 4185 KB 4204

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:

Mud-vert, mud-HZ, LWD-DGR, T-COMBO, SBL-GR (Bond Log)

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	16	42	0	60	5	0	60	VISU
SURF	12+1/4	9+5/8	36	0	946	190	0	946	CBL
1ST	8+3/4	7	26	0	5,654	530	968	5,654	CBL
1ST LINER	6+1/8	4+1/2	11.6	5539	9,215	0	0	0	

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	S.C. 1.1	1,893	530	968	5,660

Details of work:

CEMENT 7" CASING: 1ST STAGE LEAD w/245 SKS OF 10.0 ppg CLASS G LITE; TAIL 65 SKS OF 15.8 ppg CLASS G PREMIUM. DISPLACE WITH 212 BBLs OF DRILLING MUD; 2ND STAGE: 20 BBL H2O SPACER; RUN LEAD w/185 SKS OF 12.5 ppg 50/50 POZ-MIX; TAIL 35 SKS 15.8 ppg CLASS G. 20 BBL SPACER RETURNED TO SURFACE.
 TOC 1ST STAGE: 1944'
 TOC 2ND STAGE: 968'

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	
FORT HAYS	745		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	1,228		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	1,523		<input type="checkbox"/>	<input type="checkbox"/>	
BLAINE	2,361		<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	2,603		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,352		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,516		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,902		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	5,348		<input type="checkbox"/>	<input type="checkbox"/>	
ST LOUIS-SPERGEN	5,514		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

*** CONFIDENTIAL WELL *** APPROVED 12/2/2013 Doc. ID 400509190

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

Signed: _____

Print Name: KENNETH TRUEAX

Title: SR REGULATORY ANALYST

Date: _____

Email: KENNY.TRUEAX@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400574628	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400574632	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>					
400574075	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574319	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574321	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574323	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574397	LAS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574647	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574649	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400574653	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400575622	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400575635	LAS-CEMENT BOND	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)