

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



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Document Number:
400575273

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 05-017-07780-00 6. County: CHEYENNE
7. Well Name: CABOOSE Well Number: 1548-21-44 SWD
8. Location: QtrQtr: SESE Section: 21 Township: 15S Range: 48W Meridian: 6
Footage at surface: Distance: 675 feet Direction: FSL Distance: 1100 feet Direction: FEL
As Drilled Latitude: 38.722635 As Drilled Longitude: -102.779768

GPS Data:
Date of Measurement: 02/27/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: Travis Holland

** If directional footage at Top of Prod. Zone Dist.: 683 feet. Direction: FSL Dist.: 1121 feet. Direction: FEL
Sec: 21 Twp: 15S Rng: 48W
** If directional footage at Bottom Hole Dist.: 683 feet. Direction: FSL Dist.: 1121 feet. Direction: FEL
Sec: 21 Twp: 15S Rng: 48W

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) 01/31/2014 13. Date TD: 02/13/2014 14. Date Casing Set or D&A: 02/14/2014

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

16. Total Depth MD 5914 TVD** 5913 17 Plug Back Total Depth MD 5809 TVD** 5809

18. Elevations GR 4254 KB 4273 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:
Multiple CBL v.1 v.2, CBL-VDL, Caliper, Mud, LWD-MD-GR, TCombo

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	27	20	42	0	60	5	0	60	VISU
SURF	17+1/2	13+3/8	54.5	0	523	240	0	523	CBL
1ST	12+1/2	9+5/8	36	0	2,785	605	0	2,785	CALC
2ND	8+3/4	7	26	0	5,410	280	700	5,410	CALC
1ST LINER	6+1/8	4+1/2	11.6	5288	5,904	50	5,288	5,904	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	
FORT HAYS	884		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	1,348		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	1,688		<input type="checkbox"/>	<input type="checkbox"/>	
BLAINE	2,449		<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	2,689		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,412		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,573		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,943		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	5,162		<input type="checkbox"/>	<input type="checkbox"/>	
ST LOUIS	5,184		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
SPERGEN	5,247		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WARSAW	5,333		<input type="checkbox"/>	<input type="checkbox"/>	
HARRISON	5,392		<input type="checkbox"/>	<input type="checkbox"/>	
ST JOE	5,419		<input type="checkbox"/>	<input type="checkbox"/>	
KINDERHOOK	5,448		<input type="checkbox"/>	<input type="checkbox"/>	
ARBUCKLE	5,467		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

*** Confidential Well *** Approved 3/25/14 Doc. ID 400577340
Well awaiting UIC permit approval at time of submission

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

Signed: _____

Print Name: KENNY TRUEAX

Title: SR. REGULATORY ANALYST

Date: _____

Email: KENNY.TRUEAX@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400578313	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400578359	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"/>
400577348	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other Attachments			
400578074	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578094	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578099	PDF-CBL 2ND RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578104	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578335	PDF-CBL 2ND RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578355	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578361	PDF-CALIPER	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578363	PDF-CBL 3RD RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578371	LAS-CBL 2ND RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578377	LAS-CBL 2ND RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578381	LAS-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578387	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578607	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578608	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578609	LAS-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578610	PDF-RESISTIVITY	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)