

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
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Document Number:

400529206

Date Received:

12/30/2013

## 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 &amp; GAS ONSHORE LP

Phone: (720) 9294317

3. Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-37828-00

6. County: WELD

7. Well Name: ZIEMER

Well Number: 35C-5HZ

8. Location: QtrQtr: LOT 2 Section: 5 Township: 1N Range: 65W Meridian: 6

Footage at surface: Distance: 372 feet Direction: FNL Distance: 2459 feet Direction: FWL

As Drilled Latitude: 40.086644 As Drilled Longitude: -104.688314

## GPS Data:

Data of Measurement: 09/30/2013 PDOP Reading: 2.0 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage at Top of Prod. Zone Dist.: 1077 feet. Direction: FNL Dist.: 2103 feet. Direction: FWL

Sec: 5 Twp: 1N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 485 feet. Direction: FSL Dist.: 2031 feet. Direction: FWL

Sec: 5 Twp: 1N 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) 09/27/2013 13. Date TD: 10/18/2013 14. Date Casing Set or D&amp;A: 10/19/2013

## 15. Well Classification:

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

16. Total Depth MD 11408 TVD\*\* 7323 17 Plug Back Total Depth MD 11333 TVD\*\* 7324

18. Elevations GR 4946 KB 4960

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

## 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	1,038	372	0	1,038	VISU
1ST	8+3/4	7	26	0	7,748	790	238	7,748	CBL
1ST LINER	6+1/8	4+1/2	11.6	6650	11,383				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			<input type="checkbox"/>	<input type="checkbox"/>	UNABLE TO OBSERVE FT. HAYS TOP DUE TO FAULTING.
SHARON SPRINGS	7,023		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,061		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,650		<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: 12/30/2013 Email: katie.kistner@anadarko.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2114633	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400532756	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>					
400529206	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529233	CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529239	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529241	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529242	GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529243	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529244	MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400532757	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Received Cement Job Summary. Ready to pass.	5/14/2014 9:46:01 AM
Permit	Second request for missing Cement Job Summary.	5/13/2014 9:02:19 AM
Permit	Ft Hays not encountered due to faulting. WO Cement Job Summary.	2/26/2014 8:12:05 AM
Permit	Missing Ft Hays top. Requested Cement Job summary, not invoice.	2/25/2014 2:31:41 PM

Total: 4 comment(s)