

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:

400619125

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 05-123-38785-00 6. County: WELD  
7. Well Name: AGGREGATE STATE Well Number: 13N-16HZ  
8. Location: QtrQtr: NESW Section: 9 Township: 2N Range: 66W Meridian: 6  
Footage at surface: Distance: 2389 feet Direction: FSL Distance: 1639 feet Direction: FWL  
As Drilled Latitude: 40.151924 As Drilled Longitude: -104.785839

## GPS Data:

Data of Measurement: 02/04/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage at Top of Prod. Zone Dist.: 1653 feet. Direction: FSL Dist.: 797 feet. Direction: FWL

Sec: 9 Twp: 2N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 486 feet. Direction: FSL Dist.: 418 feet. Direction: FWL

Sec: 16 Twp: 2N Rng: 66W

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) 01/30/2014 13. Date TD: 04/10/2014 14. Date Casing Set or D&amp;A: 04/11/2014

## 15. Well Classification:

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

16. Total Depth MD 14141 TVD\*\* 7263 17 Plug Back Total Depth MD 14083 TVD\*\* 7263

18. Elevations GR 4904 KB 4920

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	1,028	384	0	1,028	VISU
1ST	8+3/4	7	26	0	7,687	770	39	7,687	CBL
1ST LINER	6+1/8	4+1/2	11.6	6682	14,131	411	6,682	14,131	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	
SUSSEX	4,421		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,192		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,310		<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 KistnerTitle: Regulatory Analyst

Date: \_\_\_\_\_

Email: katie.kistner@anadarko.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400619147	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400619145	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>					
400619135	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400619137	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400619140	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400619141	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400619143	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)