

FORM
5Rev
09/14

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:

400742691

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

OGCC Operator Number: 47120

Contact Name: ILA BEALE

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6408

Address: P O BOX 173779

Fax:

City: DENVER

State: CO

Zip: 80217-

API Number 05-123-39244-00

County: WELD

Well Name: SACK STATE

Well Number: 30C-30HZ

Location: QtrQtr: SWSW Section: 31 Township: 1N Range: 67W Meridian: 6

Footage at surface: Distance: 825 feet Direction: FSL Distance: 895 feet Direction: FWL

As Drilled Latitude: 40.002613 As Drilled Longitude: -104.939345

GPS Data:

Date of Measurement: 08/12/2014 PDOP Reading: 1.0 GPS Instrument Operator's Name: Carli Sloan

** If directional footage at Top of Prod. Zone Dist.: 1390 feet. Direction: FSL Dist.: 332 feet. Direction: FWL

Sec: 31 Twp: 1N Rng: 67W

** If directional footage at Bottom Hole Dist.: 19 feet. Direction: FNL Dist.: 349 feet. Direction: FWL

Sec: 30 Twp: 1N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/12/2014 Date TD: 11/11/2014 Date Casing Set or D&A: 11/23/2014

Rig Release Date: 11/25/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17415 TVD** 7883 Plug Back Total Depth MD 17361 TVD** 7883

Elevations GR 5065 KB 5071 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CBL, GR, MUD

CASING, LINER AND CEMENT

| 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 | 6 | 1,264 | 512 | 0 | 1,264 | VISU |
| 1ST | 8+3/4 | 7 | 26 | 25 | 8,208 | 710 | 480 | 8,208 | CBL |
| 1ST LINER | 6+1/8 | 4+1/2 | 11.6 | 7121 | 17,411 | 680 | 6,722 | 17,411 | 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:

FORMATION LOG INTERVALS AND TEST ZONES

| FORMATION NAME | Measured Depth | | Check if applies | | COMMENTS (All DST and Core Analysis must be submitted to COGCC) |
|----------------|----------------|--------|------------------|-------|---|
| | Top | Bottom | DST | Cored | |
| SUSSEX | 5,101 | | | | |
| SHARON SPRINGS | 7,461 | | | | |
| NIOBRARA | 7,494 | | | | |
| FORT HAYS | 8,151 | | | | |
| CODELL | 10,968 | | | | This is the depth at which the formation was first drill into; unable to measure formation top. |

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: ILA BEALE

Title: STAFF REG. SPECIALIST

Date: _____

Email: rscdjpostdrill@anadarko.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|--|---|--|
| <u>Attachment Checklist</u> | | | |
| 400742713 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400742711 | 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> | | | |
| 400742709 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400749185 | LAS-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400749186 | PDF-MEASUREMENT/LOGGING WHILE DRILLING | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400749192 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400752676 | PDF-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)