

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



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Document Number:

400644357

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: 96155

Contact Name: Elvera Berryman

Name of Operator: WHITING OIL & GAS CORPORATION

Phone: (303) 390-4221

Address: 1700 BROADWAY STE 2300

Fax: (303) 390-1598

City: DENVER State: CO Zip: 80290

API Number 05-123-39201-00

County: WELD

Well Name: Horsetail

Well Number: 30F-3107

Location: QtrQtr: SENW Section: 30 Township: 10N Range: 57W Meridian: 6

Footage at surface: Distance: 2373 feet Direction: FNL Distance: 2039 feet Direction: FWL

As Drilled Latitude: 40.810549 As Drilled Longitude: -103.796032

GPS Data:

Date of Measurement: 04/23/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: Michael Brown

** If directional footage at Top of Prod. Zone Dist.: 318 feet. Direction: FNL Dist.: 2372 feet. Direction: FWL

Sec: 30 Twp: 10N Rng: 57W

** If directional footage at Bottom Hole Dist.: 590 feet. Direction: FSL Dist.: 2141 feet. Direction: FWL

Sec: 31 Twp: 10N Rng: 57W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/12/2014 Date TD: 07/20/2014 Date Casing Set or D&A: 07/21/2014

Rig Release Date: 07/22/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 13071 TVD** 5564 Plug Back Total Depth MD 13071 TVD** 5564

Elevations GR 4780 KB 4797 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

LWD, MUD, CBL (Note: Logging Waiver, Neutron log run on Horsetail 30F-1948)

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
CONDUCTOR	20	16	84	0	97		0	97	VISU
SURF	13+1/2	9+5/8	36	0	1,611	456	0	1,611	VISU
1ST	8+3/4	7	29	0	5,974	794	1,558	5,974	CBL
1ST LINER	6+1/8	4+1/2	11.60	4838	13,061	504	4,838	13,061	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	
PIERRE	1,463		NO	NO	
HYGIENE	3,178		NO	NO	
SHARON SPRINGS	5,797		NO	NO	
NIOBRARA	5,804		NO	NO	

Comment:

Well drilled 10' passed 600' setback. Form 5A will be submitted documenting that the bottom 60' of wellbore will not produce. Float Collar is a 13011. Cement fills the hole from 13011 to TD.

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

Signed: _____

Print Name: Elvera BerrymanTitle: Engineer Tech

Date: _____

Email: elvera.berryman@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400649192	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400783971	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>					
400710562	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400710564	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400710565	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400753021	PDF-CBL 1ST RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400783970	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)