

Document Number:  
400783011

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 05-123-39427-00 County: WELD  
 Well Name: SACK Well Number: 2C-30HZ  
 Location: QtrQtr: SWSE Section: 31 Township: 1N Range: 67W Meridian: 6  
 Footage at surface: Distance: 880 feet Direction: FSL Distance: 1889 feet Direction: FEL  
 As Drilled Latitude: 40.002757 As Drilled Longitude: -104.930444

GPS Data:  
 Date of Measurement: 08/05/2014 PDOP Reading: 1.3 GPS Instrument Operator's Name: Ryan Scheuerman

\*\* If directional footage at Top of Prod. Zone Dist.: 1498 feet. Direction: FSL Dist.: 1978 feet. Direction: FEL  
 Sec: 31 Twp: 1N Rng: 67W  
 \*\* If directional footage at Bottom Hole Dist.: 25 feet. Direction: FNL Dist.: 1840 feet. Direction: FEL  
 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) 07/28/2014 Date TD: 11/09/2014 Date Casing Set or D&A: 11/12/2014  
 Rig Release Date: 12/08/2014 Per Rule 308A.b.

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

Total Depth MD 17262 TVD\*\* 7777 Plug Back Total Depth MD 17205 TVD\*\* 7779  
 Elevations GR 5041 KB 5057 **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	0	1,344	560	0	1,344	VISU
1ST	8+3/4	7	26	0	8,206	780	30	8,206	CBL
1ST LINER	6+1/8	4+1/2	11.6	7146	17,251	680	7,146	17,251	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	5,058				
SHARON SPRINGS	7,365				
NIOBRARA	7,395				
FORT HAYS	8,010				
CODELL	8,106				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.  
Per COA open hole log was run on Sack 2C-30HZ. Resistivity is on GR.

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 ?	
<b>Attachment Checklist</b>			
400783038	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400783034	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"/>
<b>Other Attachments</b>			
400783027	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400783029	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400783030	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400783033	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400783149	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)