

Document Number:  
400801757

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 05-123-40170-00 County: WELD  
 Well Name: SUMMIT Well Number: 14C-32HZ  
 Location: QtrQtr: SESW Section: 29 Township: 2N Range: 65W Meridian: 6  
 Footage at surface: Distance: 395 feet Direction: FSL Distance: 1371 feet Direction: FWL  
 As Drilled Latitude: 40.103322 As Drilled Longitude: -104.692249

GPS Data:  
 Date of Measurement: 10/24/2014 PDOP Reading: 1.0 GPS Instrument Operator's Name: Carli Sloan

\*\* If directional footage at Top of Prod. Zone Dist.: 170 feet. Direction: FNL Dist.: 2120 feet. Direction: FWL  
 Sec: 32 Twp: 2N Rng: 65W  
 \*\* If directional footage at Bottom Hole Dist.: 27 feet. Direction: FSL Dist.: 2160 feet. Direction: FWL  
 Sec: 32 Twp: 2N Rng: 65W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 10/03/2014 Date TD: 01/06/2015 Date Casing Set or D&A: 01/07/2015  
 Rig Release Date: 02/03/2015 Per Rule 308A.b.

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

Total Depth MD 12933 TVD\*\* 7338 Plug Back Total Depth MD 12881 TVD\*\* 7827

Elevations GR 4939 KB 4955 **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	1,104	461	0	1,104	VISU
1ST	8+3/4	7	26	0	7,806	800	40	7,806	CBL
1ST LINER	6+1/8	4+1/2	11.6	6680	12,929	430	6,680	12,929	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	4,505				
SHARON SPRINGS	7,036				
NIOBRARA	7,091				
FORT HAYS	7,633				
CODELL	8,435				

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 has been run on Summit 29N-29HZ.

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>			
400801904	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400801903	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>			
400801896	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400801897	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400801899	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400801901	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400813523	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)