

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:

400806523

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: Anna Cillo

Name of Operator: WHITING OIL & GAS CORPORATION

Phone: (303) 390-1328

Address: 1700 BROADWAY STE 2300

Fax:

City: DENVER State: CO Zip: 80290

API Number 05-123-38701-00

County: WELD

Well Name: Razor

Well Number: 11F-0205A

Location: QtrQtr: SENW Section: 11 Township: 10N Range: 58W Meridian: 6

Footage at surface: Distance: 2320 feet Direction: FNL Distance: 1906 feet Direction: FWL

As Drilled Latitude: 40.854208 As Drilled Longitude: -103.835471

GPS Data:

Date of Measurement: 01/22/2015 PDOP Reading: 1.6 GPS Instrument Operator's Name: Michael Brown

** If directional footage at Top of Prod. Zone Dist.: 2399 feet. Direction: FNL Dist.: 1432 feet. Direction: FWL

Sec: 11 Twp: 10N Rng: 58W

** If directional footage at Bottom Hole Dist.: 609 feet. Direction: FNL Dist.: 1489 feet. Direction: FWL

Sec: 2 Twp: 10N Rng: 58W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/18/2015 Date TD: 02/26/2015 Date Casing Set or D&A: 03/01/2015

Rig Release Date: 03/03/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 13662 TVD** 6120 Plug Back Total Depth MD 13662 TVD** 6120

Elevations GR 4992 KB 5013 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 Razor 11F-1405)

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	24	16	84	0	80		0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,862	560	0	1,862	VISU
1ST	8+3/4	7	29	0	6,565	700	38	6,565	CBL
1ST LINER	6+1/8	4+1/2	11.60	5469	13,642				

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	1,542		NO	NO	
HYGIENE	3,842		NO	NO	
SHARON SPRINGS	5,822		NO	NO	
NIOBRARA	5,830		NO	NO	

Comment:

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

Signed: _____

Print Name: Anna CilloTitle: Engineering Technician

Date: _____

Email: anna.cillo@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400820717	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400820720	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>					
400820707	PDF-CBL 3RD RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400820711	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400820712	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400820713	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400820714	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400820715	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)