

FORM
5
Rev
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:
400805071

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: Kayla Hesselstine
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6552
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-39597-00 County: WELD
 Well Name: STEWARD Well Number: 36N-6HZ
 Location: QtrQtr: SESW Section: 7 Township: 1N Range: 65W Meridian: 6
 Footage at surface: Distance: 440 feet Direction: FSL Distance: 1779 feet Direction: FWL
 As Drilled Latitude: 40.059861 As Drilled Longitude: -104.709630

GPS Data:
 Date of Measurement: 10/14/2014 PDOP Reading: 2.4 GPS Instrument Operator's Name: Carli Sloan

** If directional footage at Top of Prod. Zone Dist.: 75 feet. Direction: FNL Dist.: 2618 feet. Direction: FWL
 Sec: 18 Twp: 1N Rng: 65W
 ** If directional footage at Bottom Hole Dist.: 410 feet. Direction: FSL Dist.: 2614 feet. Direction: FEL
 Sec: 6 Twp: 1N Rng: 65W

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

Spud Date: (when the 1st bit hit the dirt) 10/06/2014 Date TD: 02/09/2015 Date Casing Set or D&A: 02/11/2015
 Rig Release Date: 02/13/2015 Per Rule 308A.b.

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

Total Depth MD 13379 TVD** 7280 Plug Back Total Depth MD 13327 TVD** 7280

Elevations GR 5001 KB 5018 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, GR

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	1,606	641	0	1,606	VISU
1ST	8+3/4	7	26	0	7,574	704	36	7,574	CBL
1ST LINER	6+1/8	4+1/2	11.6	6766	13,375	350	6,818	13,375	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	4,561				
SHARON SPRINGS	7,240				
NIOBRARA	7,270				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted. Per COA resistivity log has been run on Steward 34N-6HZ.

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

Signed: _____ Print Name: Kayla Hesseltine

Title: Regulatory Specialist Date: _____ Email: kayla.hesseltine@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400805085	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400805084	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"/>
Other Attachments			
400805078	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400805082	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400805083	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400824354	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)