

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:

400824079

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 Hesseltine

Name of Operator: KERR MCGEE OIL &amp; GAS ONSHORE LP

Phone: (720) 929-6552

Address: P O BOX 173779

Fax:

City: DENVER

State: CO

Zip: 80217-

API Number 05-123-36451-00

County: WELD

Well Name: BUFFALO

Well Number: 14C-15HZ

Location: QtrQtr: NWNW Section: 15 Township: 1N Range: 68W Meridian: 6

Footage at surface: Distance: 388 feet Direction: FNL Distance: 1199 feet Direction: FWL

As Drilled Latitude: 40.057353 As Drilled Longitude: -104.994848

## GPS Data:

Date of Measurement: 11/14/2014

PDOP Reading: 2.0

GPS Instrument Operator's Name: Carli Sloan

\*\* If directional footage at Top of Prod. Zone Dist.: 688 feet. Direction: FNL Dist.: 1845 feet. Direction: FWL

Sec: 15 Twp: 1N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 485 feet. Direction: FSL Dist.: 1910 feet. Direction: FWL

Sec: 15 Twp: 1N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 10/23/2014 Date TD: 03/25/2015 Date Casing Set or D&amp;A: 03/26/2015

Rig Release Date: 04/05/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 12447 TVD\*\* 7918 Plug Back Total Depth MD 12343 TVD\*\* 7918

Elevations GR 5133 KB 5158

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	1,301	497	0	1,301	VISU
1ST	8+3/4	7	26	0	8,337	800		8,337	CBL
1ST LINER	6+1/8	4+1/2	11.6	7230	12,437	360	7,230	12,437	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	4,803				
SHARON SPRINGS	7,560				
NIOBRARA	7,603				
FORT HAYS	8,222				
CODELL	8,332				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.

Due to complications with dirt work, CBL has not been run yet. Once CBL has been run, a final Form 5 will be submitted with the CBL and cement top.

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 ?	
<u>Attachment Checklist</u>			
400824089	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400824088	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>			
400824084	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400824085	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400824086	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400824087	DIRECTIONAL DATA	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)