

**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:  
400600174  
  
Date Received:  
05/01/2014

**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: Pauleen Tobin  
Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 837-1661  
Address: 1700 BROADWAY STE 2300 Fax: (303) 495-6780  
City: DENVER State: CO Zip: 80290

API Number 05-123-37876-00 County: WELD  
Well Name: Razor Well Number: 26K-3508B  
Location: QtrQtr: NESW Section: 26 Township: 10N Range: 58W Meridian: 6  
Footage at surface: Distance: 2374 feet Direction: FSL Distance: 2047 feet Direction: FWL  
As Drilled Latitude: 40.808885 As Drilled Longitude: -103.834289

GPS Data:  
Date of Measurement: 04/23/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Michael Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 1674 feet. Direction: FSL Dist.: 2460 feet. Direction: FWL  
Sec: 26 Twp: 10N Rng: 58W  
\*\* If directional footage at Bottom Hole Dist.: 608 feet. Direction: FSL Dist.: 2582 feet. Direction: FWL  
Sec: 35 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) 02/07/2014 Date TD: 02/15/2014 Date Casing Set or D&A: 02/16/2014  
Rig Release Date: \_\_\_\_\_ Per Rule 308A.b.

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

Total Depth MD 12415 TVD\*\* 5679 Plug Back Total Depth MD 12415 TVD\*\* 5679  
Elevations GR 4739 KB 4760 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
LWD, Mud, CBL  
Note: Full set of logs run on Razor 26K-3505A

**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	75	0	80		0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,558	667	0	1,558	VISU
1ST	8+3/4	7	29	0	5,982	707	0	5,982	CBL
1ST LINER	6	4+1/2	11.6	5051	12,405	589	5,051	12,405	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	
PIERRE	1,639		NO	NO	
HYGIENE	3,490		NO	NO	
SHARON SPRINGS	5,528		NO	NO	
NIOBRARA	5,534		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: Pauleen Tobin

Title: Engineer Tech Date: 5/1/2014 Email: pollyt@whiting.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400600193	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400600191	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>			
400600174	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400600175	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400600186	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400600187	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400600188	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400600190	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft per the operator's request.	6/24/2015 9:45:18 AM

Total: 1 comment(s)