

**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.

Document Number:  
400878217

Date Received:

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 47120 Contact Name: Kayla Hesseltine

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 05-123-40951-00 County: WELD

Well Name: CREAM Well Number: 15N-A28HZ

Location: QtrQtr: NWNE Section: 28 Township: 3N Range: 65W Meridian: 6

Footage at surface: Distance: 422 feet Direction: FNL Distance: 1450 feet Direction: FEL

As Drilled Latitude: 40.202529 As Drilled Longitude: -104.664452

GPS Data:  
Date of Measurement: 03/16/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Carli Sloan

\*\* If directional footage at Top of Prod. Zone Dist.: 153 feet. Direction: FNL Dist.: 2073 feet. Direction: FEL  
Sec: 28 Twp: 3N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 50 feet. Direction: FSL Dist.: 2267 feet. Direction: FEL  
Sec: 28 Twp: 3N Rng: 65W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 03/08/2015 Date TD: 06/02/2015 Date Casing Set or D&A: 06/03/2015

Rig Release Date: 06/28/2015 Per Rule 308A.b.

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

Total Depth MD 12651 TVD\*\* 7061 Plug Back Total Depth MD 12598 TVD\*\* 7061

Elevations GR 4827 KB 4847 **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
CONDUCTOR	26	16	42.1	0	60	32	0	60	VISU
SURF	13+1/2	9+5/8	36	0	1,207	487	0	1,207	VISU
1ST	8+3/4	7	26	0	7,564	650	0	7,564	CBL
1ST LINER	6+1/8	4+1/2	11.6	6447	12,647	410	6,447	12,647	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	4,401				
SHARON SPRINGS	7,107				
NIOBRARA	7,228				

Comment:

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

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 ?	
<b>Attachment Checklist</b>			
400878230	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400878229	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>			
400878225	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400878227	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400878228	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400885757	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

**User Group**

**Comment**

**Comment Date**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)