

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:

400866848

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 05-123-41505-00

County: WELD

Well Name: ENGLISH FARMS

Well Number: 15C-8HZ

Location: QtrQtr: NWNE Section: 8 Township: 1N Range: 65W Meridian: 6

Footage at surface: Distance: 351 feet Direction: FNL Distance: 2174 feet Direction: FEL

As Drilled Latitude: 40.072354 As Drilled Longitude: -104.686210

## GPS Data:

Date of Measurement: 08/03/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Sergio Del Carmen

\*\* If directional footage at Top of Prod. Zone Dist.: 581 feet. Direction: FSL Dist.: 1714 feet. Direction: FEL

Sec: 5 Twp: 1N Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 489 feet. Direction: FSL Dist.: 1710 feet. Direction: FEL

Sec: 8 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) 06/08/2015 Date TD: 06/25/2015 Date Casing Set or D&amp;A: 06/26/2015

Rig Release Date: 07/08/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 13375 TVD\*\* 7329 Plug Back Total Depth MD 13270 TVD\*\* 7329

Elevations GR 4949 KB 4965 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	76	36	0	76	VISU
SURF	13+1/2	9+5/8	36	0	1,854	777	0	1,854	VISU
1ST	7+7/8	5+1/2	17	0	13,363	1,510	1,770	13,363	CBL

## 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	4,534				
SHARON SPRINGS	7,239				
NIOBRARA	7,272				
FORT HAYS	7,768				
CODELL	7,870				
CARLILE	9,327				

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 ?	
<u>Attachment Checklist</u>			
400866859	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400866857	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>			
400866852	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866854	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400866856	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400890171	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)