

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:

400871134

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: 96850

Contact Name: Whitney Szabo

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Phone: (970) 263-2730

Address: PO BOX 370

Fax:

City: PARACHUTE State: CO Zip: 81635

API Number 05-045-22505-00

County: GARFIELD

Well Name: WPX GM

Well Number: 432-28

Location: QtrQtr: NESW Section: 28 Township: 6S Range: 96W Meridian: 6

Footage at surface: Distance: 1530 feet Direction: FSL Distance: 2329 feet Direction: FWL

As Drilled Latitude: 39.492140 As Drilled Longitude: -108.114775

GPS Data:

Date of Measurement: 10/30/2014 PDOP Reading: 1.7 GPS Instrument Operator's Name: Jack Kirkpatrick

** If directional footage at Top of Prod. Zone Dist.: 2339 feet. Direction: FNL Dist.: 1751 feet. Direction: FEL
Sec: 28 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 2269 feet. Direction: FNL Dist.: 1711 feet. Direction: FEL
Sec: 28 Twp: 6S Rng: 96W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number: COC24099

Spud Date: (when the 1st bit hit the dirt) 01/08/2015 Date TD: 01/16/2015 Date Casing Set or D&A: 01/17/2015

Rig Release Date: 01/17/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 7317 TVD** 6814 Plug Back Total Depth MD 7225 TVD** 5213

Elevations GR 5476 KB 5500

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

RPM/CBL/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
CONDUCTOR	24	18	48	0	63	24	0	63	VISU
SURF	13+1/2	9+5/8	32.3	0	1,747	170	0	1,747	VISU
1ST	8+3/4	4+1/2	11.6	0	7,303	1,090	3,250	7,303	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	
WASATCH G	2,278				
MESAVERDE	4,048				Mesaverde top is the Williams fork top.
WILLIAMS FORK	4,048				Williams fork top is the mesaverde top.
CAMEO	6,705				
ROLLINS	7,176				

Comment:

Please note: The "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

Surface Pressure = 0

Logs uploaded on: 11/2/2015

OH logs ran on the GM 433-28 API# 05-045-22508 and the GM 522-28 API# 05-045-22499.

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

Signed: _____

Print Name: Whitney Szabo

Title: Permit Technician II

Date: _____

Email: whitney.szabo@wpxenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400942010	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400942005	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>					
400871138	PDF-CBL 1ST RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400871143	LAS-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400871145	PDF-PULSED NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400871147	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400942001	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400942002	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)