

**DRILLING COMPLETION REPORT**

Document Number:  
400719601

Date Received:

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 Hesseltnie  
 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 05-123-39681-00 County: WELD  
 Well Name: VOGL STATE Well Number: 38N-36HZ  
 Location: QtrQtr: SWSW Section: 36 Township: 3N Range: 68W Meridian: 6  
 Footage at surface: Distance: 497 feet Direction: FSL Distance: 708 feet Direction: FWL  
 As Drilled Latitude: 40.176523 As Drilled Longitude: -104.958137

GPS Data:  
 Date of Measurement: 07/11/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Ryan Scheuerman

\*\* If directional footage at Top of Prod. Zone Dist.: 217 feet. Direction: FSL Dist.: 68 feet. Direction: FWL  
 Sec: 36 Twp: 3N Rng: 68W  
 \*\* If directional footage at Bottom Hole Dist.: 212 feet. Direction: FSL Dist.: 485 feet. Direction: FEL  
 Sec: 36 Twp: 3N Rng: 68W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 07/01/2014 Date TD: 09/16/2014 Date Casing Set or D&A: 09/18/2014  
 Rig Release Date: 09/19/2014 Per Rule 308A.b.

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

Total Depth MD 12379 TVD\*\* 7163 Plug Back Total Depth MD 12379 TVD\*\* 7163

Elevations GR 4818 KB 4834 **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
SURF	13+1/2	9+5/8	36	0	1,100	440	0	1,100	VISU
1ST	8+3/4	7	26	0	7,724	675	710	7,724	CBL
1ST LINER	6+1/8	4+1/2	11.6	6734	12,364				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	4,131			NO	
SHARON SPRINGS	7,195			NO	
NIOBRARA	7,383			NO	

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted. COA for Openhole log has been removed per Sundry-(Vogl State 39N-36HZ Doc # 400580773)

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>			
400722588	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400719628	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>			
400719614	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400719618	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400719622	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400719630	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)