

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:
400976887

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: <u>47120</u>	Contact Name: <u>DOREEN GREEN</u>
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(435) 781-9758</u>
Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	

API Number <u>05-123-29119-00</u>	County: <u>WELD</u>
Well Name: <u>STATE</u>	Well Number: <u>28-16</u>
Location: QtrQtr: <u>SWNW</u> Section: <u>16</u> Township: <u>1N</u> Range: <u>68W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>1408</u> feet Direction: <u>FNL</u>	Distance: <u>1053</u> feet Direction: <u>FWL</u>
As Drilled Latitude: <u>40.054528</u>	As Drilled Longitude: <u>-105.014450</u>

GPS Data:
Date of Measurement: 03/24/2009 PDOP Reading: 2.3 GPS Instrument Operator's Name: Cody Mattson

** If directional footage at Top of Prod. Zone Dist.: 80 feet. Direction: FNL Dist.: 2594 feet. Direction: FEL
Sec: 16 Twp: 1N Rng: 68W

** If directional footage at Bottom Hole Dist.: 80 feet. Direction: FNL Dist.: 2594 feet. Direction: FEL
Sec: 16 Twp: 1N Rng: 68W

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number: 70/8570-S

Spud Date: (when the 1st bit hit the dirt) 12/29/2008 Date TD: _____ Date Casing Set or D&A: _____
Rig Release Date: 01/02/2009 Per Rule 308A.b.

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

Total Depth MD 8561 TVD** 8136 Plug Back Total Depth MD 8518 TVD** 8093

Elevations GR 5159 KB 5174 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:

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	12+1/4	8+5/8	24	0	993	620	0	993	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 12/26/2015

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
1 INCH	1ST	1,504	150	720	1,504

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	

Comment:

BRADENHEAD-ANNULAR FILL

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

Signed: _____ Print Name: DOREEN

Title: GREEN Date: _____ Email: RSCDJPOSTDRILL@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400976891	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400976889	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Other Attachments</u>			
400976888	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400976890	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400976892	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)