

DRILLING COMPLETION REPORT

Document Number:
400978707

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: Jennifer Thomas
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6808
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-42144-00 County: WELD
 Well Name: COOK Well Number: 37N-28HZ
 Location: QtrQtr: SWSE Section: 16 Township: 2N Range: 65W Meridian: 6
 Footage at surface: Distance: 455 feet Direction: FSL Distance: 1875 feet Direction: FEL
 As Drilled Latitude: 40.132695 As Drilled Longitude: -104.666288

GPS Data:
 Date of Measurement: 10/13/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Sergio Del Carmen

** If directional footage at Top of Prod. Zone Dist.: 95 feet. Direction: FNL Dist.: 1594 feet. Direction: FEL
 Sec: 21 Twp: 2N Rng: 65W
 ** If directional footage at Bottom Hole Dist.: 78 feet. Direction: FSL Dist.: 1512 feet. Direction: FEL
 Sec: 28 Twp: 2N Rng: 65W

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

Spud Date: (when the 1st bit hit the dirt) 10/10/2015 Date TD: 12/06/2015 Date Casing Set or D&A: 12/11/2015
 Rig Release Date: 12/16/2015 Per Rule 308A.b.

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

Total Depth MD 17885 TVD** 7098 Plug Back Total Depth MD 15530 TVD** 7091
 Elevations GR 4884 KB 4909 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
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	65	28	0	65	VISU
SURF	13+1/2	9+5/8	36	0	1,910	732	0	1,910	VISU
1ST	8+1/2	5+1/2	17	0	15,619	2,230		15,619	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	4,522				
SHARON SPRINGS	6,948				
NIOBRARA	7,033				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted. The top of productive zone provided is estimated based on the landing point at 7436'MD. The top perf is planned for the landing point and the actual perforation will be reported on the Form 5A.

No CBL or CNL has been run per Rule 502b. Variance for Rule 308A. A CBL and CNL will be submitted with the final Form 5.

Per the variance, a bradenhead test has been run. Results have been reported on Document # 400977132.

Completion for this well is estimated for May 2016.

Production casing on this well was set at 15,619 ft. 2,266 ft short of TD.

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

Signed: _____

Print Name: Jennifer Thomas

Title: Regulatory Specialist

Date: _____

Email: rscdjpostdrill@andarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400978766	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400978765	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"/>
400986993	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Other Attachments			
400978755	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400978759	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400978764	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)