

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:

400961006

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: 96155

Contact Name: Elvera Berryman

Name of Operator: WHITING OIL &amp; GAS CORPORATION

Phone: (303) 390-4221

Address: 1700 BROADWAY STE 2300

Fax: (303) 390-1598

City: DENVER State: CO Zip: 80290

API Number 05-123-41650-00

County: WELD

Well Name: Horsetail

Well Number: 07E-0634

Location: QtrQtr: Lot 2 Section: 7 Township: 10N Range: 57W Meridian: 6

Footage at surface: Distance: 2505 feet Direction: FNL Distance: 768 feet Direction: FWL

As Drilled Latitude: 40.853818 As Drilled Longitude: -103.801261

## GPS Data:

Date of Measurement: 11/11/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Larry D. Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 2547 feet. Direction: FNL Dist.: 335 feet. Direction: FWL

Sec: 7 Twp: 10N Rng: 57W

\*\* If directional footage at Bottom Hole Dist.: 533 feet. Direction: FNL Dist.: 342 feet. Direction: FWL

Sec: 6 Twp: 10N Rng: 57W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/23/2015 Date TD: 12/27/2015 Date Casing Set or D&amp;A: 12/28/2015

Rig Release Date: 12/29/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 13703 TVD\*\* 5995 Plug Back Total Depth MD 13703 TVD\*\* 5995

Elevations GR 4925 KB 4946 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

LWD, Mud, CBL (Note: Logging Waiver, Neutron log run on Horsetail 07E-1802)

## 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	16	65	0	101		0	101	VISU
SURF	13+1/2	9+5/8	36	0	2,009	620	0	2,009	VISU
1ST	8+1/2	5+1/2	20	0	13,684	1,900	138	13,684	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	
PIERRE	1,750		NO	NO	
HYGIENE	3,601		NO	NO	
SHARON SPRINGS	5,693		NO	NO	
NIOBRARA	5,700		NO	NO	

Comment:

Well drilled 67' passed 600' setback. Form 5A will be submitted documenting that the bottom 68' of wellbore will not produce. Float Collar is a 13635. Cement fills the hole from 13635 to TD.

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

Signed: \_\_\_\_\_ Print Name: Engineering Technician

Title: Elvera Berryman Date: \_\_\_\_\_ Email: elvera.berryman@whiting.com

### Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400981416	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400980849	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>		
400968997	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400968998	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400968999	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400980852	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400980856	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400980858	PDF-MEASUREMENT/LOGGING WHILE DRILLING	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)