

**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:  
400961106

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 & GAS CORPORATION Phone: (303) 390-4221  
 Address: 1700 BROADWAY STE 2300 Fax: (303) 390-1598  
 City: DENVER State: CO Zip: 80290

API Number 05-123-41645-00 County: WELD  
 Well Name: Horsetail Well Number: 07E-1804  
 Location: QtrQtr: Lot 2 Section: 7 Township: 10N Range: 57W Meridian: 6  
 Footage at surface: Distance: 2460 feet Direction: FNL Distance: 890 feet Direction: FWL  
 As Drilled Latitude: 40.853953 As Drilled Longitude: -103.800819

GPS Data:  
 Date of Measurement: 11/24/2015 PDOP Reading: 2.2 GPS Instrument Operator's Name: Larry D. Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 2551 feet. Direction: FSL Dist.: 1192 feet. Direction: FWL  
 Sec: 7 Twp: 10N Rng: 57W  
 \*\* If directional footage at Bottom Hole Dist.: 34 feet. Direction: FSL Dist.: 1134 feet. Direction: FWL  
 Sec: 18 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) 02/16/2016 Date TD: 02/20/2016 Date Casing Set or D&A: 02/21/2016  
 Rig Release Date: 02/21/2016 Per Rule 308A.b.

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

Total Depth MD 13948 TVD\*\* 5830 Plug Back Total Depth MD 13948 TVD\*\* 5830  
 Elevations GR 4927 KB 4948 **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	100	0	101	VISU
SURF	13+1/2	9+5/8	36	0	2,038	794	0	2,038	VISU
1ST	8+1/2	5+1/2	20	0	13,928	2,275	1,110	13,928	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	5,704		NO	NO	
NIOBRARA	5,712		NO	NO	

Comment:

Well drilled 66' passed 100' setback. Form 5A will be submitted documenting that the bottom 69' of wellbore will not produce. Float Collar is a 13879. Cement fills the hole from 13879 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: Elvera Berryman

Title: Engineering Technician Date: \_\_\_\_\_ Email: elvera.berryman@whiting.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400991731	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401011671	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>			
401003368	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401003887	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401014585	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401014587	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401014589	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401014590	PDF-MUD	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)