

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.

Document Number:
400961081

Date Received:

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 05-123-41641-00 County: WELD

Well Name: Horsetail Well Number: 07E-1801

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

Footage at surface: Distance: 2454 feet Direction: FNL Distance: 740 feet Direction: FWL

As Drilled Latitude: 40.853965 As Drilled Longitude: -103.801362

GPS Data:
Date of Measurement: 11/24/2015 PDOP Reading: 2.1 GPS Instrument Operator's Name: Larry D. Brown

** If directional footage at Top of Prod. Zone Dist.: 2549 feet. Direction: FSL Dist.: 280 feet. Direction: FWL
Sec: 7 Twp: 10N Rng: 57W

** If directional footage at Bottom Hole Dist.: 36 feet. Direction: FSL Dist.: 151 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) 01/05/2016 Date TD: 01/10/2016 Date Casing Set or D&A: 01/11/2016

Rig Release Date: 01/12/2016 Per Rule 308A.b.

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

Total Depth MD 13938 TVD** 5733 Plug Back Total Depth MD 13938 TVD** 5733

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	2,039	630	0	2,039	VISU
1ST	8+1/2	5+1/2	20	0	13,919	1,940	84	13,919	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	5,700		NO	NO	
NIOBRARA	5,706		NO	NO	

Comment:

Well drilled 64' passed 100' setback. Form 5A will be submitted documenting that the bottom 67' of wellbore will not produce. Float Collar is a 13871. Cement fills the hole from 13871 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 ?	
Attachment Checklist			
400974540	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400980897	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"/>
Other Attachments			
400972833	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400974696	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400980898	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400991777	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400991778	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400991779	LAS-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)