

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



Document Number:

400558015

Date Received:

02/28/2014

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type Final completion Preliminary completion

OGCC Operator Number: 96155 Contact Name: Pauleen Tobin
Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 837-1661
Address: 1700 BROADWAY STE 2300 Fax: (303) 495-6780
City: DENVER State: CO Zip: 80290

API Number 05-123-37730-00 County: WELD
Well Name: Razor Well Number: 27L-3401B
Location: QtrQtr: NWSW Section: 27 Township: 10N Range: 58W Meridian: 6
Footage at surface: Distance: 2448 feet Direction: FSL Distance: 627 feet Direction: FWL
As Drilled Latitude: 40.808881 As Drilled Longitude: -103.858494

GPS Data:
Date of Measurement: 02/21/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: Michael Brown

** If directional footage at Top of Prod. Zone Dist.: 1728 feet Direction: FSL Dist.: 293 feet Direction: FWL
Sec: 27 Twp: 10N Rng: 58W

** If directional footage at Bottom Hole Dist.: 600 feet Direction: FSL Dist.: 165 feet Direction: FWL
Sec: 34 Twp: 10N Rng: 58W

Field Name: WILDCAT Field Number: 99999
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/25/2013 Date TD: 09/05/2013 Date Casing Set or D&A: 09/05/2013
Rig Release Date: Per Rule 308A.b.

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

Total Depth MD 12445 TVD** 5708 Plug Back Total Depth MD 12445 TVD** 5708

Elevations GR 4754 KB 4771 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
Mud, LWD, RCBL

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 | 18+5/8 | 16 | 84 | 0 | 80 | | | | CALC |
| SURF | 13+1/2 | 9+5/8 | 36 | 0 | 1,575 | 719 | 0 | 1,575 | CALC |
| 1ST | 8+3/4 | 7 | 29 | 0 | 6,078 | 452 | 33 | 6,078 | CBL |
| 1ST LINER | 6 | 4+1/2 | 11.6 | 5021 | 12,435 | | | | |

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 | 1,440 | | NO | NO | |
| HYGIENE | 3,227 | | NO | NO | |
| SHARON SPRINGS | 5,675 | | NO | NO | |
| NIOBRARA | 5,694 | | NO | NO | |

Operator Comments

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

Signed: _____ Print Name: Pauleen Tobin

Title: Engineer Tech Date: 2/28/2014 Email: pollyt@whiting.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|--|---|--|
| Attachment Checklist | | | |
| 400564030 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400558087 | 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 | | | |
| 400558015 | FORM 5 SUBMITTED | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400558042 | PDF-Measurement/Logging While Drilling | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400558044 | LAS-Measurement/Logging While Drilling | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400558047 | PDF-MUD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400558051 | PDF-CBL 1ST RUN | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 400558089 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

General Comments

User Group

Comment

Comment Date

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|-----------------------|----------------------------|
| | | |

Total: 0 comment(s)