

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:
401051851

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

API Number 05-123-41783-00 County: WELD
Well Name: Horsetail Fed Well Number: 07F-0639
Location: QtrQtr: SENW Section: 7 Township: 10N Range: 57W Meridian: 6
Footage at surface: Distance: 2597 feet Direction: FNL Distance: 2237 feet Direction: FWL
As Drilled Latitude: 40.853609 As Drilled Longitude: -103.795952

GPS Data:
Date of Measurement: 01/19/2016 PDOP Reading: 1.0 GPS Instrument Operator's Name: Michael Brown

** If directional footage at Top of Prod. Zone Dist.: 2511 feet. Direction: FSL Dist.: 1868 feet. Direction: FWL
Sec: 7 Twp: 10N Rng: 57W
** If directional footage at Bottom Hole Dist.: 2511 feet. Direction: FSL Dist.: 1868 feet. Direction: FWL
Sec: 7 Twp: 10N Rng: 57W

Field Name: WILDCAT Field Number: 99999
Federal, Indian or State Lease Number: COC75061

Spud Date: (when the 1st bit hit the dirt) 02/27/2016 Date TD: 02/29/2016 Date Casing Set or D&A: 02/27/2016
Rig Release Date: 02/29/2016 Per Rule 308A.b.

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

Total Depth MD 6226 TVD** 6017 Plug Back Total Depth MD 6226 TVD** 6017
Elevations GR 4899 KB 4920 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
Mud, LWD (Note: Neutron log run on Horsetail 07F-1839)

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	2,027	920	0	2,027	VISU

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 03/01/2016

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE		640	4,543	5,455

Details of work:

KOP cement for sidetrack

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	1,700		NO	NO	
HYGIENE	3,550		NO	NO	
SHARON SPRINGS	5,738		NO	NO	
NIOBRARA	5,752		NO	NO	
FORT HAYS	5,978		NO	NO	

Comment:

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: _____ Email: pollyt@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401051876	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401051875	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			
401051883	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401051912	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401051913	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401051915	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401051916	PDF-MUD	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)