

**FORM
5**Rev
09/14**State of Colorado
Oil and Gas Conservation Commission**

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Document Number:

400767401

Date Received:

01/22/2015

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: 47120 Contact Name: Kayla Hesseltine
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6552
Address: P O BOX 173779 Fax: _____
City: DENVER State: CO Zip: 80217-

API Number 05-123-32342-00 County: WELD
Well Name: BADDING Well Number: 16-26SX
Location: QtrQtr: NESE Section: 26 Township: 2N Range: 66W Meridian: 6
Footage at surface: Distance: 1320 feet Direction: FSL Distance: 1310 feet Direction: FEL
As Drilled Latitude: 40.105659 As Drilled Longitude: -104.739576

GPS Data:

Date of Measurement: 06/09/2011 PDOP Reading: 2.1 GPS Instrument Operator's Name: Renee Doiron** If directional footage at Top of Prod. Zone Dist.: 714 feet Direction: FSL Dist.: 863 feet Direction: FELSec: 26 Twp: 2N Rng: 66W** If directional footage at Bottom Hole Dist.: 663 feet Direction: FSL Dist.: 836 feet Direction: FELSec: 26 Twp: 2N Rng: 66WField Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 05/04/2011 Date TD: 05/06/2011 Date Casing Set or D&A: 05/07/2011Rig Release Date: 05/07/2011 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 5175 TVD** 5105 Plug Back Total Depth MD 5128 TVD** 5058Elevations GR 5088 KB 5103 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

Triple combo, CBL

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
SURF	12+1/4	8+5/8	24	0	1,162	730	0	1,162	VISU
1ST	7+7/8	4+1/2	11.6	0	5,165	604	380	5,165	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	
PARKMAN	4,256				
SUSSEX	4,650				

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: Kayla Hesseltine

Title: Regulatory Specialist

Date: 1/22/2015

Email: kayla.hesseltine@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400190383	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400190382	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>					
400767401	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400770838	TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400770851	TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400776896	CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401251725	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	• "1st Liner" corrected to "First String"; comes to surface.	04/06/2017
Permit	Created and added digital data file from doc# 400190382 and added to this form. Changed well classification per GOR on form 5A (Doc# 400760038).	04/05/2017

Total: 2 comment(s)