

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



DE	ET	OE	ES
----	----	----	----

Document Number:
401252511

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: 47120 Contact Name: Jennifer Thomas
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6808
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-42628-00 County: WELD
 Well Name: JAGUAR Well Number: 28C-14HZ
 Location: QtrQtr: SESW Section: 23 Township: 1N Range: 67W Meridian: 6
 Footage at surface: Distance: 410 feet Direction: FSL Distance: 1765 feet Direction: FWL
 As Drilled Latitude: 40.030487 As Drilled Longitude: -104.860966

GPS Data:
 Date of Measurement: 10/27/2016 PDOP Reading: 1.2 GPS Instrument Operator's Name: NICK ROADIFER

** If directional footage at Top of Prod. Zone Dist.: 98 feet. Direction: FSL Dist.: 2431 feet. Direction: FWL
 Sec: 23 Twp: 1N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 697 feet. Direction: FNL Dist.: 2397 feet. Direction: FWL
 Sec: 14 Twp: 1N Rng: 67W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 11/23/2016 Date TD: 12/28/2016 Date Casing Set or D&A: 12/29/2016
 Rig Release Date: 02/08/2017 Per Rule 308A.b.

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

Total Depth MD 14255 TVD** 7576 Plug Back Total Depth MD 14150 TVD** 7583

Elevations GR 4993 KB 5010 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
 CBL, GR OHL RESISTIVITY RUN ON JAGUAR 3N-14HZ
 API 05-123-42625

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	26	16	42.1	0	97	64	0	97	VISU
SURF	13+1/2	9+5/8	36	0	2,263	885	0	2,263	VISU
1ST	8+1/2	5+1/2	17	0	14,243	1,916	158	14,243	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	
SUSSEX	4,820				
SHARON SPRINGS	7,477				
NIOBRARA	7,490				
FORT HAYS	8,135				
CODELL	8,244				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted. Per Rule 371.p Exception, open hole resistivity logs have been run on the JAGUAR 3N-14HZ well (API 05-123-42625).

The top of productive zone provided is an estimate based on the landing point at 8410' MD.

Completion is estimated for Q2, 2017.

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

Signed: _____

Print Name: Jennifer Thomas _____

Title: Regulatory Specialist _____

Date: _____

Email: jennifer.thomas@anadarko.com _____

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401252529	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401252528	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			
401252524	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401252525	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401252526	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401252540	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401252541	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)