

**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:  
401261486

Date Received:

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 05-123-43211-00 County: WELD

Well Name: BBKB Well Number: 36E-35HZ

Location: QtrQtr: NENW Section: 35 Township: 3N Range: 67W Meridian: 6

Footage at surface: Distance: 319 feet Direction: FNL Distance: 1494 feet Direction: FWL

As Drilled Latitude: 40.188219 As Drilled Longitude: -104.861915

GPS Data:  
Date of Measurement: 12/08/2016 PDOP Reading: 1.3 GPS Instrument Operator's Name: ROB WILSON

\*\* If directional footage at Top of Prod. Zone Dist.: 72 feet. Direction: FSL Dist.: 42 feet. Direction: FEL  
Sec: 27 Twp: 3N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 468 feet. Direction: FSL Dist.: 34 feet. Direction: FEL  
Sec: 35 Twp: 3N Rng: 67W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 12/24/2016 Date TD: 02/06/2017 Date Casing Set or D&A: 02/06/2017

Rig Release Date: 02/18/2017 Per Rule 308A.b.

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

Total Depth MD 12687 TVD\*\* 7119 Plug Back Total Depth MD 12569 TVD\*\* 7122

Elevations GR 4826 KB 4843 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, GR 43207 CNL RUN ON BBKB 37C-35HZ, API 05-123-

**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	1,918	728	0	1,918	VISU
1ST	7+7/8	5+1/2	17	0	12,663	1,225	154	12,663	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	5,180				
SHARON SPRINGS	7,350				
NIOBRARA	7,462				

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, compensated neutron logs have been run on the BBKB 37C-35HZ well (API 05-123-43207).

The top of productive zone provided is an estimate based on the landing point at 7737' MD.

Completion is estimated for Q4, 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 ?	
<b>Attachment Checklist</b>			
401261707	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401261706	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"/>
<b>Other Attachments</b>			
401261543	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401261544	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401261547	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401261548	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401261705	DIRECTIONAL DATA	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)