

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:
401299036

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: SAMANTHA PETITE
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-3167
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-42562-00 County: WELD
 Well Name: PUMA FED Well Number: 30N-14HZ
 Location: QtrQtr: SWSW Section: 23 Township: 1N Range: 67W Meridian: 6
 Footage at surface: Distance: 290 feet Direction: FSL Distance: 586 feet Direction: FWL
 As Drilled Latitude: 40.030157 As Drilled Longitude: -104.865178

GPS Data:
 Date of Measurement: 10/27/2016 PDOP Reading: 1.3 GPS Instrument Operator's Name: NICK ROADIFER

** If directional footage at Top of Prod. Zone Dist.: 99 feet. Direction: FSL Dist.: 246 feet. Direction: FWL
 Sec: 23 Twp: 1N Rng: 67W
 ** If directional footage at Bottom Hole Dist.: 682 feet. Direction: FSL Dist.: 251 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) 01/09/2017 Date TD: 04/03/2017 Date Casing Set or D&A: 04/04/2017
 Rig Release Date: 04/09/2017 Per Rule 308A.b.

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

Total Depth MD 14100 TVD** 7466 Plug Back Total Depth MD 13997 TVD** 7468

Elevations GR 4991 KB 5023 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
 CBL, GR OHL RESISTIVITY RUN ON PUMA FED 4C-14HZ,
 API 05-123-42568

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	0	112	64	0	112	VISU
SURF	13+1/2	9+5/8	36	0	2,292	881	0	2,292	VISU
1ST	8+1/2	5+1/2	17	0	14,089	1,850	708	14,089	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	4,821				
SHARON SPRINGS	7,532				
NIOBRARA	7,559				

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 PUMA FED 4C-14HZ well (API 05-123-42568).

The Top of Productive Zone provided is an estimate based on the landing point at 8238' MD.

Completion is estimated for Q3, 2017.

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

Signed: _____ Print Name: SAMANTHA PETITE

Title: REGULATORY COMPLIANCE Date: _____ Email: samantha.petite@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
401299153	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401299151	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			
401299120	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401299127	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401299147	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401299149	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401299150	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)