

FORM
5Rev
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:

401299222

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 05-123-42564-00

County: WELD

Well Name: PUMA FED

Well Number: 29C-14HZ

Location: QtrQtr: SWSW Section: 23 Township: 1N Range: 67W Meridian: 6

Footage at surface: Distance: 290 feet Direction: FSL Distance: 751 feet Direction: FWL

As Drilled Latitude: 40.030159 As Drilled Longitude: -104.864588

GPS Data:

Date of Measurement: 10/27/2016 PDOP Reading: 1.4 GPS Instrument Operator's Name: Nick Roadifer

** If directional footage at Top of Prod. Zone Dist.: 301 feet. Direction: FSL Dist.: 1220 feet. Direction: FWL

Sec: 23 Twp: 1N Rng: 67W

** If directional footage at Bottom Hole Dist.: 617 feet. Direction: FSL Dist.: 1239 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) 01/17/2017 Date TD: 02/14/2017 Date Casing Set or D&A: 02/15/2017

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 14116 TVD** 7605 Plug Back Total Depth MD 14055 TVD** 7605

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

List Electric Logs Run:

CBL, GR
API 05-123-42568

OHL-RESISITIVITY RUN ON PUMA FED 4C-14HZ,

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	883	0	2,292	VISU
1ST	8+1/2	5+1/2	17	0	14,105	1,870	810	14,105	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	4,837				
SHARON SPRINGS	7,455				
NIOBRARA	7,479				
FORT HAYS	8,124				
CODELL	8,201				
CARLILE	8,309				

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 8532' 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 ?
<u>Attachment Checklist</u>		
401299265	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401301516	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>		
401299253	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401299256	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401299259	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401299260	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401299261	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)