

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:

401299787

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 05-123-42568-00

County: WELD

Well Name: PUMA FED

Well Number: 4C-14HZ

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

Footage at surface: Distance: 290 feet Direction: FSL Distance: 661 feet Direction: FWL

As Drilled Latitude: 40.030158 As Drilled Longitude: -104.864909

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.: 464 feet. Direction: FSL Dist.: 570 feet. Direction: FWL

Sec: 23 Twp: 1N Rng: 67W

** If directional footage at Bottom Hole Dist.: 698 feet. Direction: FSL Dist.: 577 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) 01/13/2017 Date TD: 03/13/2017 Date Casing Set or D&A: 03/15/2017

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 14200 TVD** 7621 Plug Back Total Depth MD 14099 TVD** 7622

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-RESISTIVITY 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 | 2,281 | 878 | 0 | 2,281 | VISU |
| 1ST | 8+1/2 | 5+1/2 | 17 | 0 | 14,191 | 1,870 | 370 | 14,191 | 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 | 4,818 | | | | |
| SHARON SPRINGS | 7,431 | | | | |
| NIOBRARA | 7,451 | | | | |
| FORT HAYS | 8,276 | | | | |
| CODELL | 8,518 | | | | |

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 8696' 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> | | | |
| 401299840 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 401299839 | 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> | | | |
| 401299812 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401299815 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401299824 | LAS-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401299827 | PDF-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401299838 | DIRECTIONAL DATA | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401301518 | LAS-RESISTIVITY | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401301519 | PDF-RESISTIVITY | 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)