

FORM  
**5**  
Rev 6/99

State of Colorado  
Oil and Gas Conservation Commission

120 Lincoln Street, Suite 801, Denver, Colorado 80202



FOR OGCC USE ONLY

RECEIVED

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## DRILLING COMPLETION

This form is to be submitted within thirty (30) days of a well's completion. If the well is deepened or sidetracked, a new Form 5 will be required. If an attempt has been made to complete/produce a well, then the operator shall submit a Form 5A (Completed Interval Report.) If the well has been plugged, submit a Form 6 (Well Abandonment Report.)

1. OGCC Operator Number: <u>47120</u>		4. Contact Name & Phone Elaine Winick		<div>Complete the Attachment Checklist</div>	
2. Name of Operator: <u>Kerr-McGee Rocky Mountain Corporation</u>					
3. Address: <u>3939 Carson Avenue</u>		No: <u>970-330-0614</u>		Oper	OGCC
City: <u>Evans</u>	State: <u>CO</u>	Zip: <u>80620</u>	Fax: <u>970-330-0431</u>	Survey Plat	
5. API Number: <u>05-123-20521</u>		6. County: <u>Weld</u>		Directional Survey	
7. Well Name: <u>HSR-STARCK</u>		Well Number: <u>12-18</u>		Surface Equipment Diagram	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NWSW Sec 18-T4N-R67W 6th P.M.</u>				Technical Information Page	
Footage at Surface: <u>2179' FSL &amp; 830' FWL</u>		9. Was a directional survey run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Other	
If directional, footage at Top of Prod. Zone: <u>same</u>					
If directional, footage at Bottom Hole: <u>same</u>					
10. Field Name: <u>Wattenberg</u>		Field Number: <u>90750</u>		<div>15. Well Classification</div>	
11. Federal, Indian or State Lease Number					
12. Spud Date <u>09/19/01</u>		13. Date TD Reached <u>09/25/01</u>		14. Date Completed or D&A <u>10/17/01</u>	
16. Total depth MD <u>7356'</u> TVD		17. Plug Back Total depth MD <u>7326'</u> TVD		<input type="checkbox"/> Dry <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas	
18. Was a Mud Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		19. Elevations		<input type="checkbox"/> Coated	
** One copy of all electric and mud log runs must be submitted. **		GR <u>4815'</u> KB <u>4829'</u>		<input type="checkbox"/> Stratigraphic <input type="checkbox"/> Disposal	
20. List Electric Logs Run: <u>PEALC, PECNLD, CBL</u>				<input type="checkbox"/> Enhanced Recovery	
				<input type="checkbox"/> Gas Storage <input type="checkbox"/> Observation	
				<input type="checkbox"/> Other:	

## CASING, LINER and CEMENT

[illegible]

### FORMATION LOG INTERVALS and TEST ZONES

[illegible]

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

Print Name Elaine Winick

Signed John W. Wink

**Title:** Operations Technician

Date: 01/28/02