

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



Document Number:

400876000

Date Received:

09/14/2015

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type Final completion Preliminary completion

OGCC Operator Number: 47120 Contact Name: Kayla Hesseltnie
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6552
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-41350-00 County: WELD
 Well Name: JESTER Well Number: 8N-14HZ
 Location: QtrQtr: SWNW Section: 15 Township: 3N Range: 67W Meridian: 6
 Footage at surface: Distance: 1380 feet Direction: FNL Distance: 265 feet Direction: FWL
 As Drilled Latitude: 40.229157 As Drilled Longitude: -104.885288

GPS Data:

Date of Measurement: 07/20/2015 PDOP Reading: 1.0 GPS Instrument Operator's Name: Sergio Del Carmen** If directional footage at Top of Prod. Zone Dist.: 1663 feet Direction: FNL Dist.: 809 feet. Direction: FWLSec: 15 Twp: 3N Rng: 67W** If directional footage at Bottom Hole Dist.: 1758 feet Direction: FNL Dist.: 2 feet. Direction: FELSec: 14 Twp: 3N Rng: 67WField Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 05/25/2015 Date TD: 07/04/2015 Date Casing Set or D&A: 07/05/2015Rig Release Date: 07/17/2015 Per Rule 308A.b.

Well Classification:

 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage ObservationTotal Depth MD 17007 TVD** 7139 Plug Back Total Depth MD 16955 TVD** 7142Elevations GR 4793 KB 4813 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:

CBL, MWD, (IND in 123-17927, 123-25001, 123-25002, 123-16861)

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	73	52	0	73	VISU
SURF	13+1/2	9+5/8	36	0	834	339	0	834	VISU
1ST	8+3/4	7	26	0	7,352	660	16	7,352	CBL
1ST LINER	6+1/8	4+1/2	11.6	6291	17,003	720	6,291	17,003	CALC

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	4,012				
SHARON SPRINGS	6,858				
NIOBRARA	6,956				

Operator Comments

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.

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

Signed: _____ Print Name: Kayla Hesseltine

Title: Regulatory Specialist Date: 9/14/2015 Email: kayla.hesseltine@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400876009	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400876008	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>			
1734421	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876000	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876005	MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876006	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400876007	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400896875	CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Requested the CBL.LAS file. Uploaded as doc#1734421 • Corrected the comments in the Drilling/Submit tab • Corrected the "Cement Top" for the First String from 20' to 16' per the Cement Bond Log	12/18/2017
Permit	Changed Logs Run to CBL, MWD, (IND in 123-17927, 123-25001, 123-25002, 123-16861)	12/15/2017

Total: 2 comment(s)