



State of Colorado
Oil and Gas Conservation Commission
Denver, Colorado 80203 (303)894-2100 Fax (303)894-2100

FOR OGCC USE ONLY

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OGCC

IG COMPLETION REPORT

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		Complete the Attachment Checklist	
2. Name of Operator: <u>Kerr-McGee Rocky Mountain Corporation</u>		No: <u>970-330-0614</u>			
3. Address: <u>3939 Carson Avenue</u>		City: <u>Evans</u> State: <u>CO</u> Zip: <u>80620</u>		Oper	
City: <u>Evans</u> State: <u>CO</u> Zip: <u>80620</u>		Fax: <u>970-330-0431</u>		OGCC	
5. API Number: <u>05-123-20336</u>		6. County: <u>Weld</u>		Survey Plat	
7. Well Name: <u>HSR-PARKER</u>		Well Number: <u>15-16A</u>		Directional Survey	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWSE Sec 16-T2N-R67W 6th P.M.</u>		Footage at Surface: <u>460' FSL & 2180' FEL</u>		Surface Equipment Diagram	
9. Was a directional survey run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If directional, footage at Top of Prod. Zone: <u>same</u>		Technical Information Page	
If directional, footage at Bottom Hole: <u>same</u>		10. Field Name: <u>Wattenberg</u> Field Number: <u>90750</u>		Other	
11. Federal, Indian or State Lease Number		12. Spud Date: <u>06/25/01</u>		15. Well Classification	
13. Date TD Reached: <u>07/01/01</u>		14. Date Completed or D&A: <u>07/09/01</u>			
16. Total depth MD <u>8191'</u> TVD		17. Plug Back Total depth MD <u>8143'</u> TVD		<input type="checkbox"/> Dry <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas	
18. Was a Mud Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		19. Elevations GR <u>5011'</u> KB <u>5023'</u>		<input type="checkbox"/> Coaled	
20. List Electric Logs Run: <u>CDCNGR, DIGLGR, CBL</u>				<input type="checkbox"/> Stratigraphic <input type="checkbox"/> Disposal	
				<input type="checkbox"/> Enhanced Recovery	
				<input type="checkbox"/> Gas Storage <input type="checkbox"/> Observation	
				Other:	

CASING, LINER and CEMENT

Submit contractor's cement job summary for each string cemented

String	Hole Size	Csg/Liner Size	Csg/Liner Wt (Lbs.)	Csg/Liner Top	Csg/Tool Setting Depth	No of Sacks	Cement Interval		Identify Method	
							Top	Bottom	CBL	Calc
Surface	12-1/4"	8-5/8"	24#	surface	775'	545	surface	775'		x
1st	7-7/8"	4-1/2"	11.6#	surface	8175'	425	6700'	8175'	x	
					Stage Cement	5500	280	3730'	5459'	x
					Stage Cement					
					Stage Cement					
					Stage Cement					
1st Liner										

FORMATION LOG INTERVALS and TEST ZONES

Formation	Measured Depth		Check if applies		*** All DST and Core analysis must be submitted to COGCC. *** Comments
	Top	Bottom	DST	Cored	
Sussex	4498'				
Shannon	5033'				
Niobrara	7320'				
Fort Hays	7572'				
Codeil	7593'				
D Sand					
J Sand	8031'				
Dakota					
TD	8191'				

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 Elaine Winick Title: Operations Technician Date: 11/07/01