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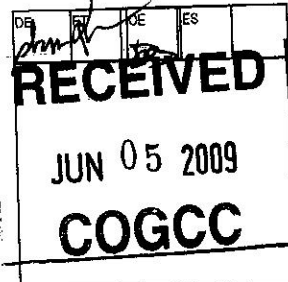
Rev 12/05

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

## DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of 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.



|   |           |   |  |
|---|-----------|---|--|
| 1. OGCC Operator Number: 47120                                      |           | 4. Contact name: Carolyn Brockman   |  |
| 2. Name of Operator: Kerr McGee Oil & Gas Onshore LP                |           | Phone: 720-929-6476   |  |
| 3. Address: 1099 18th Street  |           | Fax: 720-929-7476   |  |
| City: Denver  | State: CO | Zip: 80202  |  |
| 5. API Number: 05-123-29383 ✓                                       |           | 6. County: WELD   |  |
| 7. Well Name: NELSON  |           | Well Number: 23-35 ✓  |  |
| 8. Location (Qtr, Sec, Twp, Rng, Meridian): NESW 35-2N-68W 6th PM ✓ |           |   |  |
| Footage at surface: 1610 FNL/FSL 1674 FEL/FWL 491 FSL 510 FWL ✓✓    |           |   |  |
| As Drilled Latitude: 40.092081 As Drilled Longitude: -104.973903    |           |   |  |
| GPS Data:   |           | Data of measurement: 05/20/2009 ✓   |  |
| PDOP Reading: 2.7   |           | GPS Instrument Operator's Name: Cody Mattson  |  |
| ** If directional, Footage at Top of Prod. Zone:                    |           |   |  |
| 1321 FNL/FSL 2580 FEL/FWL FSL FWL Sec, Twp, Rng: 35-2N-68W          |           |   |  |
| ** If directional, Footage at Bottom Hole:                          |           |   |  |
| 1323 FNL/FSL 2583 FEL/FWL FSL FWL Sec, Twp, Rng: 35-2N-68W          |           |   |  |
| 9. Field Name: WATTENBERG SPINDLE                                   |           | 10. Field Number: 90750 7790  |  |
| 11. Federal, Indian or State Lease Number:                          |           |   |  |
| 12. Spud Date: (1st bit hit the dirt) 3/2/2009                      |           | 13. Date TD: 3/5/2009   |  |
|   |           | 14. Date Casing Set or D&A: 03/06/2009  |  |
| 16. Total Depth MD 8030 ft TVD 7896 ft                              |           | 17. Plug Back Total Depth MD 7987 ft TVD 7854 ft  |  |
| 18. Elevations GR 4969 ft KB 4984 ft                                |           | One paper copy of all electric and mud logs must be submitted along with one digital LAS copy as available. |  |
| 19. List Electric Logs Run: CGL-CDL-CNL-DIL-GR-ML, CBL, ADIC, CNL   |           |   |  |

|  |   |
|--|---|
| Complete the Attachment Checklist            |   |
| Op   | OGCC  |
| Logs   | X   |
| Directional Survey**                         | X 1785801   |
| DST Analysis                                 |   |
| Core Analysis                                |   |
| Cmt Summary*                                 | X   |
| 15. Well Classification                      |   |
| <input type="checkbox"/> Dry                 | <input type="checkbox"/> Oil <input type="checkbox"/> Gas |
| <input type="checkbox"/> Coalbed             | <input type="checkbox"/> Disposal                         |
| <input type="checkbox"/> Stratigraphic       |   |
| <input type="checkbox"/> Enhanced Recovery   |   |
| <input type="checkbox"/> Gas Storage         |   |
| <input type="checkbox"/> Observation         |   |
| <input type="checkbox"/> Other: See comments |   |

20.

## CASING, LINER and CEMENT

If Cement Bond Log was not run, submit contractor's cement job summary for each string cemented

| String                              | Hole Size | Csg/Liner Size | Csg/Liner Top | Csg/Tool Setting Depth | Number of sacks cmt | Cement Top | Cement Bottom | CBL* | Calculated* |
|-------------------------------------|-----------|----------------|---------------|------------------------|---------------------|------------|---------------|------|-------------|
| SURFACE CASING                      | 12.250    | 8.625          | 0             | 931                    | 590                 | 0          | 931           |      | ✓           |
| PRODUCTION CASING                   | 7.875     | 4.500          | 0             | 8018                   | 620                 | 3765       | 8018          | ✓    |             |
| Stage, Squeeze, Remedial Cement Job |           |                |               |                        |                     |            |               |      |             |
| Stage, Squeeze, Remedial Cement Job |           |                |               |                        |                     |            |               |      |             |

21.

## FORMATION LOG INTERVALS AND TEST ZONES

All DST and Core Analysis must be submitted to COGCC.

| FORMATION NAME | Measured Depth |        | Check if applies |       |
|----------------|----------------|--------|------------------|-------|
|                | Top            | Bottom | DST              | Cored |
| PARKMAN        | 4182           | 4390   |                  |       |
| SUSSEX         | 4730           | 4828   |                  |       |
| SHANNON        | 5160           | 5184   |                  |       |
| NIOBRARA       | 7508           |        |                  |       |
| FT HAYS        | 7794           |        |                  |       |
| CODELL         | 7816           |        |                  |       |

|                                    |
|------------------------------------|
| COMMENTS                           |
| Well classification to be provided |
| Upon completion                    |
|                                    |
|                                    |
|                                    |
|                                    |
|                                    |

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

Print Name: Carolyn Brockman

E-mail: Carolyn.Brockman@anadarko.com

Signature: Carolyn Brockman

Title: Staff Regulatory Analyst

Date: 6/4/2009



**CEMENTER'S WELL SERVICE, INC.**  
P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-1774



OUR INVOICE

**RECEIVED 197291**

JUN 05 2009

**COGGG**

123-29383

|   |                              |                                    |                      |
|---|------------------------------|------------------------------------|----------------------|
| Date <b>3-2-09</b>                                    | Well Owner <b>KERR MCGEE</b> | Well No. <b>23-35</b>              | Lease <b>1/21/04</b> |
| County <b>WELD</b>                                    | State <b>CO</b>              | Field                              |                      |
| Charge to <b>KERR MCGEE OIL &amp; GAS DUSHORE, LP</b> |                              |                                    | Charge Code          |
| Address <b>1999 BROADWAY, STE 37MO (XTREME #12)</b>   |                              |                                    | For Office Use Only  |
| City, State <b>DENVER, CO 80202</b>                   |                              |                                    |                      |
| Pump Truck No. <b>1201</b>                            | Code                         | Bulk Truck No. <b>1287/1216</b>    | Code                 |
| Type of Job   | Depth                        | <b>R.939</b>                       | To                   |
| Surface <b>9 5/8" 24"</b>                             | Bottom of Surface            | <b>R.931</b>                       | To                   |
| Plug  | Plug Landed @ <b>987</b>     | Pt. Time On <b>2030</b>            |                      |
| Production  | Pipe Landed @ <b>931</b>     | Pt. Time Off <b>Plug Down 2345</b> |                      |

| Reference No. | Description                         | Qty. | Meas. | Unit Price | Amount |
|---------------|-------------------------------------|------|-------|------------|--------|
|               | Pump Truck Charge                   |      |       |            |        |
|               | Cement Nod TYPE III                 | 590  | SKS   |            |        |
|               | Poz. Mix                            |      |       |            |        |
|               | Calcium Chloride                    | 2.5% |       |            |        |
|               | Gel % Flo-Cele 1/4 #Per Sack        |      |       |            |        |
|               | Handling Charge                     |      |       |            |        |
|               | Hauling Charge                      |      |       |            |        |
|               | Additional Cement                   |      |       |            |        |
|               | ADUCKS RATE - 4 BPM                 |      |       |            |        |
|               | DISP. RATE - 5 BPM                  |      |       |            |        |
|               | SUMP W/L - 1.32 FT <sup>3</sup> /SK |      |       |            |        |
|               | SUMP W/LT - 14.8-15.0 PPG           |      |       |            |        |
|               | WATER/CEMENT - 10.25 GAL/SK         |      |       |            |        |
|               | WATER TEMP - 50°                    |      |       |            |        |
|               | PREFLUSH -                          |      |       |            |        |
|               | MIX -                               |      |       |            |        |
|               | CHANGE VALVES -                     |      |       |            |        |
|               | DISPLACE -                          |      |       |            |        |
|               | PLUG LANNED @ 900 PSI               |      |       |            |        |
|               | TOTAL SLURRY W/L - 108 BBL'S        |      |       |            |        |

|  |                      |               |          |                |         |       |               |
|--|----------------------|---------------|----------|----------------|---------|-------|---------------|
| Remarks: <b>PREFLUSH 1/30 BBL'S H<sub>2</sub>O</b> | Tax Reference Code   | Sub Total     |          |                |         |       |               |
| <b>DISPLACE 1/56.5 BBL'S H<sub>2</sub>O</b>        | State <b>CO 2.9%</b> | Tax           |          |                |         |       |               |
| <b>INDUATE 7 BBL'S CEMENT</b>                      | Disc.                | Total         |          |                |         |       |               |
| Truck No.  | Code                 | State Mileage | Nebraska | Colorado       | Wyoming | Other | Total Mileage |
| <b>1201</b>  |                      | Pump Truck    |          | <b>32</b>      |         |       |               |
| <b>1287/1216</b>                                   |                      | Bulk Truck    |          | <b>32 / 32</b> |         |       |               |

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By **SID, STEVE, MIKE**

Received By

**974156**

Customer or Agent