

DRILLING COMPLETION REPORT

Document Number:
401602422

Date Received:

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: CRYSTAL MCCLAIN
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 9294398
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-45089-00 County: WELD
 Well Name: NEWBY STATE Well Number: 15N-4HZ
 Location: QtrQtr: SWSE Section: 33 Township: 3N Range: 68W Meridian: 6
 Footage at surface: Distance: 589 feet Direction: FSL Distance: 1440 feet Direction: FEL
 As Drilled Latitude: 40.176578 As Drilled Longitude: -105.003502

GPS Data:
 Date of Measurement: 11/22/2017 PDOP Reading: 1.7 GPS Instrument Operator's Name: PRESTON KNUTSEN

** If directional footage at Top of Prod. Zone Dist.: 33 feet. Direction: FNL Dist.: 1594 feet. Direction: FEL
 Sec: 4 Twp: 2N Rng: 68W
 ** If directional footage at Bottom Hole Dist.: 828 feet. Direction: FNL Dist.: 1665 feet. Direction: FEL
 Sec: 9 Twp: 2N Rng: 68W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 10/25/2017 Date TD: 02/03/2018 Date Casing Set or D&A: 02/04/2018
 Rig Release Date: 02/09/2018 Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 13762 TVD** 7299 Plug Back Total Depth MD 13751 TVD** 7299
 Elevations GR 4895 KB 4927 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
GR, CBL, CNL RUN ON THE NEWBY STATE 36N-4HZ WELL (API: 05-123-45091).

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 | 2,250 | 834 | 0 | 2,250 | VISU |
| 1ST | 7+7/8 | 5+1/2 | 17 | 0 | 13,751 | 1,400 | 760 | 13,751 | 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 | 4,077 | | | | |
| SHARON SPRINGS | 7,092 | | | | |
| NIOBRARA | 7,268 | | | | |

Comment:

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

Per Rule 317.p Exception, Compensated Neutron Logs have been run on the Newby State 36N-4HZ Well (API: 05-123-45091).

The Top of Productive Zone provided is an estimate based on the landing point at 7716' MD.

Completion is estimated for Q2 2018.

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

Signed: _____ Print Name: CRYSTAL MCCLAIN

Title: REGULATORY ANALYST Date: _____ Email: CRYSTAL.MCCLAIN@ANADARKO.COM

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| Attachment Checklist | | | |
| 401602455 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 401602454 | 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"/> |
| Other Attachments | | | |
| 401602437 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401602439 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401602444 | LAS-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401602447 | PDF-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401602451 | DIRECTIONAL DATA | 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)