

**State of Colorado
Oil and Gas Conservation Commission**

120 Lincoln Street, Suite 801, Denver, Colorado 80202



4-210

DRILLING COMPLETE

FOR OGCC USE ONLY

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OGCC

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>		Fax: <u>970-330-0431</u>		Survey Plat	
City: <u>Evans</u>	State: <u>CO</u>	Zip: <u>80620</u>			
5. API Number: <u>05-123-16094</u>		6. County: <u>Weld</u>		Directional Survey	
7. Well Name: <u>BEEBE DRAW</u>		Well Number: <u>41-5A</u>		Surface Equipment Diagram	
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NENE Sec 5-T3N-R65W 6th P.M.</u>		9. Was a directional survey run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Technical Information Page	
Footage at Surface: <u>772' FNL & 602' FEL</u>		If directional, footage at Top of Prod. Z: <u>same</u>		Other	
If directional, footage at Bottom Hole: <u>same</u>					
10. Field Name: <u>Wattenberg</u>		Field Number: <u>90750</u>		15. Well Classification	
11. Federal, Indian or State Lease Number					
12. Spud Date: <u>09/20/92</u>		13. Date TD Reached: <u>10/03/01</u>		<input type="checkbox"/> Dry <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas	
14. Date Completed or D&A: <u>10/18/01</u>				<input type="checkbox"/> Coaled <input type="checkbox"/> Stratigraphic <input type="checkbox"/> Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Gas Storage <input type="checkbox"/> Observation Other:	
16. Total depth MD <u>7850'</u> TVD		17. Plug Back Total depth MD <u>7804'</u> TVD			
18. Was a Mud Log Run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		19. Elevations GR <u>4856'</u> KB <u>4866'</u>			
** One copy of all electric and mud log runs must be submitted.**					
20. List Electric Logs Run: <u>SACNLD, SAAILC, CBL</u>					

CASING, LINER and CEMENT

21. 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	581'	290	surface	581'		x	
1st	7-7/8"	4-1/2"	11.6#	surface	7345'	200	3980'	7345'	x		
Stage Cement							150	6310'	7345'	x	
Stage Cement											
Stage Cement											
Stage Cement											
1st Line	3-7/8"	2-7/8"	6.5#	7288'	7835'	35	7288'	7835'	x		

FORMATION LOG INTERVALS and TEST ZONES

22. *** All DST and Core analysis must be submitted to OGCC. ***

Formation	Measured Depth		Check if applies		Comments
	Top	Bottom	DST	Cored	
Sussex		4550'			
Shannon					
Niobrara	6918'				
Fort Hays					
Codell	7218'				
D Sand					
J Sand	7680'				
Dakota					
TD	7850'				

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: 01/28/02