

FORM  
5Rev  
09/14State of Colorado  
Oil and Gas Conservation Commission

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



DE ET OE ES

Document Number:

401719524

Date Received:

## DRILLING COMPLETION REPORT

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 &amp; GAS ONSHORE LP

Phone: (720) 9294398

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

API Number 05-123-46250-00

County: WELD

Well Name: VERDE

Well Number: 13-13HZ

Location: QtrQtr: NWNE Section: 13 Township: 1N Range: 66W Meridian: 6

Footage at surface: Distance: 904 feet Direction: FNL Distance: 2631 feet Direction: FEL

As Drilled Latitude: 40.056068 As Drilled Longitude: -104.725404

GPS Data:

Date of Measurement: 03/07/2018 PDOP Reading: 1.4 GPS Instrument Operator's Name: ROB WILSON

\*\* If directional footage at Top of Prod. Zone Dist.: 340 feet. Direction: FNL Dist.: 1570 feet. Direction: FEL

Sec: 13 Twp: 1N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 53 feet. Direction: FNL Dist.: 1571 feet. Direction: FEL

Sec: 1 Twp: 1N Rng: 66W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/01/2018 Date TD: 04/25/2018 Date Casing Set or D&amp;A: 04/26/2018

Rig Release Date: 06/02/2018 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 18665 TVD\*\* 7307 Plug Back Total Depth MD 18660 TVD\*\* 7307

Elevations GR 5071 KB 5097 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

GR, CBL, OHL RUN ON THE VERDE 13-18HZ (API: 05-123-46258).

## 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             | 106           | 64        | 0       | 106     | VISU   |
| SURF        | 13+1/2       | 9+5/8          | 36    | 0             | 1,878         | 673       | 0       | 1,878   | VISU   |
| 1ST         | 7+7/8        | 5+1/2          | 17    | 0             | 18,660        | 1,730     | 230     | 18,660  | 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 |   |
| FOX HILLS      | 1,616          |        |                  |       |   |
| PARKMAN        | 4,421          |        |                  |       |   |
| SUSSEX         | 4,778          |        |                  |       |   |
| SHARON SPRINGS | 7,362          |        |                  |       |   |
| NIOBRARA       | 7,418          |        |                  |       |   |

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, Open Hole Resistivity Logs have been run on the Verde 13-18HZ Well (API: 05-123-46258).

The Top of Productive Zone provided is an estimate based on the landing point at 7850' MD.

Completion is estimated for Q1 2019.

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 ?  |
|-----------------------------|-----------------------|---|
| <u>Attachment Checklist</u> |                       |   |
| 401719553                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|                             | Core Analysis         | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 401719556                   | 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>    |                       |   |
| 401719543                   | LAS-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401719544                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401719547                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401719549                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401719558                   | 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)