

DRILLING COMPLETION REPORT

Document Number:
401995986

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 05-123-47709-00 County: WELD
 Well Name: CASTLE PINES Well Number: 19-11HZ
 Location: QtrQtr: SESE Section: 19 Township: 2N Range: 66W Meridian: 6
 Footage at surface: Distance: 484 feet Direction: FSL Distance: 988 feet Direction: FEL
 As Drilled Latitude: 40.117679 As Drilled Longitude: -104.814131

GPS Data:
 Date of Measurement: 10/23/2018 PDOP Reading: 1.2 GPS Instrument Operator's Name: RYAN GROVES

** If directional footage at Top of Prod. Zone Dist.: 764 feet. Direction: FSL Dist.: 1014 feet. Direction: FEL
 Sec: 19 Twp: 2N Rng: 66W
 ** If directional footage at Bottom Hole Dist.: 51 feet. Direction: FNL Dist.: 1042 feet. Direction: FEL
 Sec: 18 Twp: 2N Rng: 66W

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

Spud Date: (when the 1st bit hit the dirt) 09/25/2018 Date TD: 12/21/2018 Date Casing Set or D&A: 12/22/2018
 Rig Release Date: 02/06/2019 Per Rule 308A.b.

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

Total Depth MD 17400 TVD** 7188 Plug Back Total Depth MD 17376 TVD** 7187
 Elevations GR 4876 KB 4902 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MWD/LWD. (GR/RES in API 123-47708).

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 | 1,849 | 689 | 0 | 1,849 | VISU |
| 1ST | 8+1/2 | 5+1/2 | 17 | 0 | 17,390 | 2,090 | 960 | 17,390 | 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 | 1,232 | | | | |
| PARKMAN | 4,030 | | | | |
| SUSSEX | 4,426 | | | | |
| SHARON SPRINGS | 7,244 | | | | |
| NIOBRARA | 7,361 | | | | |

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 Castle Pines 19-3HZ Well (API 123-47708).

The Top of Productive Zone provided is an estimate based on the landing point at 7683' MD.

Completion is estimated for Q2 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 ? | |
|-----------------------------|-----------------------|---|--|
| Attachment Checklist | | | |
| 401996035 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 401996037 | 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 | | | |
| 401996015 | LAS-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401996017 | PDF-CEMENT BOND | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401996025 | LAS-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401996033 | PDF-MWD/LWD | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| 401996038 | 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)

