

**FORM**  
**5**Rev  
10/14**State of Colorado**  
**Oil and Gas Conservation Commission**

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



Document Number:

402275492

Date Received:

**DRILLING COMPLETION REPORT**

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

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-

Email: CRYSTAL.MCCLAIN@ANADARKO.COM

API Number 05-123-50193-00

County: WELD

Well Name: FARLEY

Well Number: 23-5HZ

Location: QtrQtr: SWSW Section: 23 Township: 3N Range: 66W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 686 feet Direction: FSL Distance: 492 feet Direction: FWL

As Drilled Latitude: 40.205343 As Drilled Longitude: -104.752022

GPS Data:

Date of Measurement: 07/24/2019 PDOP Reading: 1.4 GPS Instrument Operator's Name: CHAD GARDNER

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone Dist: 306 feet Direction: FSL Dist: 1879 feet Direction: FWL  
Sec: 23 Twp: 3N Rng: 66W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole Dist: 449 feet Direction: FSL Dist: 1816 feet Direction: FWL  
Sec: 26 Twp: 3N Rng: 66W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/06/2019 Date TD: 10/16/2019 Date Casing Set or D&amp;A: 10/16/2019

Rig Release Date: 11/02/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 13041 TVD\*\* 7278 Plug Back Total Depth MD 13030 TVD\*\* 7278

Elevations GR 4939 KB 4956

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD/LWD. (GR/OHL in API 123-50190).

**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	97	64	0	97	VISU
SURF	13+1/2	9+5/8	36	0	1,900	711	0	1,900	VISU
1ST	7+7/8	5+1/2	17	0	13,031	1,190	1,362	13,031	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	1,178				
PARKMAN	4,377				
SUSSEX	4,567				
SHARON SPRINGS	7,341				
NIOBRARA	7,430				

Operator Comments:

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 Logs have been run on the Farley 23-6HZ well (API 123-50190).

The Top of Productive Zone provided is an estimate based on the landing point at 7906' MD.

As-drilled GPS data was taken after conductor was set.

Completion is estimated for Q1 2021.

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

Signed: \_\_\_\_\_

Print Name: CRYSTAL MCCLAINTitle: REGULATORY ANALYST Date: \_\_\_\_\_ Email: CRYSTAL.MCCLAIN@ANADARKO.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402275497	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402275499	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>			
402275493	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402275494	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402275495	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402275496	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402275500	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)

