

FORM
5Rev
02/20**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:

402409846

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 completionOGCC Operator Number: 47120Contact Name: CRYSTAL MCCLAINName of Operator: KERR MCGEE OIL & GAS ONSHORE LPPhone: (720) 9294398Address: P O BOX 173779

Fax: _____

City: DENVER State: CO Zip: 80217-Email: CRYSTAL_MCCLAIN@OXY.COMAPI Number 05-123-50509-00County: WELDWell Name: MAE JWell Number: 8-8HZLocation: QtrQtr: SESW Section: 8 Township: 1N Range: 68W Meridian: 6
FNL/FSL FEL/FWLFootage at surface: Distance: 791 feet Direction: FSL Distance: 2414 feet Direction: FWLAs Drilled Latitude: 40.060419 As Drilled Longitude: -105.028603GPS Data: GPS Quality Value: 1.9 Type of GPS Quality Value: PDOP Date of Measurement: 09/26/2019GPS Instrument Operator's Name: RYAN GROVES

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone Dist: 200 feet Direction: FSL Dist: 958 feet Direction: FEL
Sec: 8 Twp: 1N Rng: 68W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole Dist: 52 feet Direction: FNL Dist: 997 feet Direction: FEL
Sec: 8 Twp: 1N Rng: 68WField Name: WATTENBERGField Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 10/09/2019 Date TD: 03/19/2020 Date Casing Set or D&A: 03/20/2020Rig Release Date: 04/09/2020 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ ObservationTotal Depth MD 13896 TVD** 7840 Plug Back Total Depth MD 13871 TVD** 7840Elevations GR 5083 KB 5103Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD/LWD. (GR/CNL in API 123-50510).

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	100	64	0	100	VISU
SURF	13+1/2	9+5/8	36	0	1,918	716	0	1,918	VISU
1ST	7+7/8	5+1/2	17	0	13,244	1,117	1,402	13,244	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	1,079				
PARKMAN	4,409				
SUSSEX	4,779				
SHARON SPRINGS	7,812				
NIOBRARA	7,861				
FORT HAYS	8,423				
CODELL	8,500				
CARLILE	9,519				

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, Cased Hole Neutron Logs have been run on the Mae J 8-1HZ Well (API 123-50510).

The Top of Productive Zone provided is an estimate based on the landing point at 8852' MD.

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

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@OXY.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
402409910	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402409912	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>		
402409881	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402409884	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402409908	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402409909	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402409913	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)

