

FORM  
5

Rev  
12/20

State of Colorado

Energy & Carbon Management Commission

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



Document Number:

403838048

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

ECMC Operator Number: 47120 Contact Name: Christina Hirtler
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6301
Address: P O BOX 173779 Fax:
City: DENVER State: CO Zip: 80217- Email: christina\_hirtler@oxy.com

API Number 05-123-52357-00 County: WELD
Well Name: SALAZAR Well Number: 20-5HZ
Location: QtrQtr: SWNW Section: 20 Township: 3N Range: 67W Meridian: 6
Footage at surface: Distance: 1922 feet Direction: FNL Distance: 515 feet Direction: FWL
As Drilled Latitude: 40.213348 As Drilled Longitude: -104.921431
GPS Data: GPS Quality Value: 1.5 Type of GPS Quality Value: PDOP Date of Measurement: 01/18/2024
\*\* If directional footage at Top of Prod. Zone Dist: 2005 feet Direction: FNL Dist: 1751 feet Direction: FEL
\*\* If directional footage at Bottom Hole Dist: 1209 feet Direction: FNL Dist: 118 feet Direction: FEL
Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/01/2024 Date TD: 03/23/2024 Date Casing Set or D&A: 03/24/2024
Rig Release Date: 05/03/2024 Per Rule 308A.b.

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

Total Depth MD 20586 TVD\*\* 7168 Plug Back Total Depth MD 20528 TVD\*\* 7168
Elevations GR 4902 KB 4928 Digital Copies of ALL Logs must be Attached

List All Logs Run:
CBL, MWD/LWD, 1 Resistivity log was run on this well, the others on the SALAZAR 20-2HZ API# 123-52354 and SALAZAR 20-8HZ API# 123-52360

FLUID VOLUMES USED IN DRILLING OPERATIONS
(Enter "0" if a type of a fluid was not used. Do not leave blank.)
Total Fluids (bbls): 4092 Fresh Water (bbls): 1294

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 2507

Recycled Produced Water Alternative (bbls): \_\_\_\_\_

**CASING, LINER AND CEMENT**

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	26	16	A252	36.94	0	80	64	80	0	VISU
SURF	13+1/2	9+5/8	L80	36	0	1890	698	1890	0	VISU
1ST	7+7/8	5+1/2	P110	17	0	20575	1979	20586	1380	CBL

Bradenhead Pressure Action Threshold 567 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

**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 ECMC)
	Top	Bottom	DST	Cored	
PARKMAN	3,982				
SUSSEX	4,524				
SHANNON	5,148				
SHARON SPRINGS	7,774				
NIOBRARA	7,856				
FORT HAYS	8,309				
CODELL	8,403				

Operator Comments:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL may be different than permitted. Per Rule 317.p Exception a Resistivity log was run on this well and the SALAZAR 20-2HZ API# 123-52354 and SALAZAR 20-8HZ API# 123-52360  
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: Christina Hirtler

Title: Regulatory

Date: \_\_\_\_\_

Email: christina\_hirtler@oxy.com

**ATTACHMENT LIST**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
403838111	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
403838118	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"/>
<b><u>Other Attachments</u></b>			
403838123	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377727	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377728	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377739	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377740	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377744	PDF-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
404377746	LAS-RESISTIVITY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	Returned to Draft for missing Fort Hays formation top correction	10/02/2025

Total: 1 comment(s)