

FORM
5

Rev
02/08

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400086648

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

1. OGCC Operator Number: 47120 4. Contact Name: Kenny Trueax
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6383
3. Address: P O BOX 173779 Fax: (720) 929-7383
City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-31358-00 6. County: WELD
7. Well Name: BALLINGER Well Number: 22-18
8. Location: QtrQtr: SWNW Section: 18 Township: 3N Range: 67W Meridian: 6
Footage at surface: Direction: FNL Distance: 1692 Direction: FWL Distance: 1019
As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:
Data of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage
at Top of Prod. Zone Distance: 2596 Direction: FNL Distance: 1215 Direction: FWL
at Bottom Hole Distance: 2592 Direction: FNL Distance: 1224 Direction: FWL

9. Field Name: WATTENBERG 10. Field Number: 90750
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 07/21/2010 13. Date TD: 07/23/2010 14. Date Casing Set or D&A: 07/24/2010

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

16. Total Depth MD 7935 TVD 7802 17 Plug Back Total Depth MD 7886 TVD 7753

18. Elevations GR 4866 KB 4881 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	24#	683	430	683	0
1ST	7+7/8	4+1/2	11.6#	7,924	1,037	7,924	683

REMEDIAL CEMENT

Cement work date: _____

Details of work: _____

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,880		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,362		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,944		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,176		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,451		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,473		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,917		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____

Print Name: Kenny Trueax

Title: Regulatory Analyst II

Date: _____

Email: Kenny.Trueax@anadarko.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name	Doc Description
400086754	DIRECTIONAL SURVEY	Anadarko - Ballinger 22-18 p1a vs final.pdf
400086968	CMT SUMMARY	Ballinger 22-18 Sfc Cement Ticket.pdf

Total Attach: 2 Files