

**FORM
5**Rev
02/08State 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:

400087990

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: Cindy Vue

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6832

3. Address: P O BOX 173779

Fax: (720) 929-7832

City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-31406-00

6. County: WELD

7. Well Name: KERR-MCGEE

Well Number: 14-3

8. Location: QtrQtr: NWSW Section: 3 Township: 1N Range: 68W Meridian: 6

Footage at surface: Direction: FSL Distance: 1666 Direction: FWL Distance: 1149

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: 659 Direction: FSL Distance: 1974 Direction: FWL

at Bottom Hole Distance: 659 Direction: FSL Distance: 1986 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) 08/03/2010 13. Date TD: 08/06/2010 14. Date Casing Set or D&A: 08/08/2010

15. Well Classification:

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

16. Total Depth MD 8530 TVD 8420 17 Plug Back Total Depth MD 5757 TVD 5647

18. Elevations GR 5042 KB 5059

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:

PRELIMINARY FORM 5

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#	998	630	998	0
S.C. 1.1	7+7/8	4+1/2	11.6#	8,476	215	8,476	7,255
S.C. 1.2	7+7/8	4+1/2	11.6#	5,757	700	5,757	898

REMEDIAL CEMENT

Cement work date: _____

Details of work:

DV TOOL @ 5757'

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	S.C. 1.1	8,476	215	7,255	8,476
DV TOOL	S.C. 1.2	5,757	700	898	5,757

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	
SUSSEX	4,706		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,256		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,590		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,919		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,941		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,376		<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: Cindy Vue

Title: Regulatory Analyst II

Date: _____

Email: Cindy.Vue@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
400087995	DIRECTIONAL SURVEY	KERR MCGEE Kerr McGee 14-3 Final Plot & Survey (08.18.10).pdf
400087996	CMT SUMMARY	KERR-MCGEE 14-3 SURF CMT TKT.PDF

Total Attach: 2 Files