

**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

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.

Document Number:

400096667

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 05-123-31273-00 6. County: WELD
7. Well Name: NRC Well Number: 8-9
8. Location: QtrQtr: SWNE Section: 9 Township: 1N Range: 67W Meridian: 6
Footage at surface: Direction: FNL Distance: 1730 Direction: FEL Distance: 1703
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: 1985 Direction: FNL Distance: 643 Direction: FEL
Sec: 9 Twp: 1N Rng: 67W
at Bottom Hole Distance: 1991 Direction: FNL Distance: 640 Direction: FEL
Sec: 9 Twp: 1N Rng: 67W

9. Field Name: SPINDLE 10. Field Number: 77900
11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 09/01/2010 13. Date TD: 09/06/2010 14. Date Casing Set or D&A: 09/07/2010

15. Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8655 TVD 8515 17 Plug Back Total Depth MD 5762 TVD 562218. Elevations GR 4997 KB 4014

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#	1,016	640	1,016	0
1ST	7+7/8	4+1/2	11.6#	8,642	825	8,642	915

ADDITIONAL 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	4,302		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,696		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,452		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,770		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,791		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,246		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	8,425		<input type="checkbox"/>	<input type="checkbox"/>	
LAKOTA	8,538		<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
400096675	DIRECTIONAL SURVEY	Anadarko NRC 8-9 Final Survey.pdf
400096677	CMT SUMMARY	NRC 8-9 Sfc Cmt Ticket.pdf

Total Attach: 2 Files