

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



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Document Number:

400103204

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 05-123-31266-00 6. County: WELD
 7. Well Name: BERNHARDT Well Number: 4-1
 8. Location: QtrQtr: NENW Section: 1 Township: 4N Range: 67W Meridian: 6
 Footage at surface: Direction: FNL Distance: 1319 Direction: FWL Distance: 1987
 As Drilled Latitude: 40.345200 As Drilled Longitude: -104.841335

GPS Data:

Data of Measurement: 08/05/2010 PDOP Reading: 2.2 GPS Instrument Operator's Name: Renee Doiron

** If directional footage

at Top of Prod. Zone Distance: 671 Direction: FNL Distance: 657 Direction: FWL
 Sec: 1 Twp: 4N Rng: 67W
 at Bottom Hole Distance: 677 Direction: FNL Distance: 646 Direction: FWL
 Sec: 1 Twp: 4N Rng: 67W

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) 06/09/2010 13. Date TD: 06/11/2010 14. Date Casing Set or D&A: 06/12/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 7675 TVD 7477 17 Plug Back Total Depth MD 7622 TVD 7424

18. Elevations GR 4826 KB 4841

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:

PE/AILC, CNDL, ML; CBL

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	910	570	910	0
1ST	7+7/8	4+1/2	11.6	7,666	1,000	7,666	550

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	3,770		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,908		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,156		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,487		<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
400103207	DIRECTIONAL SURVEY	BERNHARDT 4-1 Directional Survey.pdf
400103208	CMT SUMMARY	BERNHARDT 4-1 Surface Cement Ticket.pdf

Total Attach: 2 Files