

**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:

400080448

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: 66571 4. Contact Name: Joan Proulx
2. Name of Operator: OXY USA WTP LP Phone: (970) 263.3641
3. Address: P O BOX 27757 Fax: (970) 263.3694
City: HOUSTON State: TX Zip: 77227

5. API Number 05-045-18061-00 6. County: GARFIELD
7. Well Name: Cascade Creek Well Number: 697-17-64A
8. Location: QtrQtr: NWSW Section: 16 Township: 6S Range: 97W Meridian: 6
Footage at surface: Distance: 2186 feet Direction: FSL Distance: 731 feet Direction: FWL
As Drilled Latitude: 39.521780 As Drilled Longitude: -108.231560

GPS Data:

Data of Measurement: 10/08/2010 PDOP Reading: 2.3 GPS Instrument Operator's Name: J. Grabowski

** If directional footage

at Top of Prod. Zone Distance: 634 feet Direction: FSL Distance: 151 feet Direction: FEL
Sec: 17 Twp: 6S Rng: 97W
at Bottom Hole Distance: 496 feet Direction: FSL Distance: 226 feet Direction: FEL
Sec: 17 Twp: 6S Rng: 97W

9. Field Name: GRAND VALLEY 10. Field Number: 31290

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 01/12/2010 13. Date TD: 03/01/2010 14. Date Casing Set or D&A: 03/10/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8901 TVD 8611 17 Plug Back Total Depth MD 8845 TVD 855518. Elevations GR 8322 KB 8352

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:

Slim Sonic Logging Tool/CBL/Variable Density
Reservoir Saturation Tool/Sigma Mode-Fixed Beam/GR-CCL
Reservoir Saturation Tool/Elastic/Capture Mode/GR-CCL
Processed Data/SSLT-B

20. Casing, Liner and Cement:

CASING

| Casing Type | Size of Hole | Size of Casing | Weight Per Foot | Setting Depth | Sacks Cement | Cement Top | Cement Bot | Status |
|-------------|--------------|----------------|-----------------|---------------|--------------|------------|------------|--------|
| CONDUCTOR | 20+0/0 | 16+0/0 | 65 | 90 | 4 | 0 | 90 | CALC |
| SURF | 12+1/4 | 9+5/8 | 36 | 2,720 | 1,425 | 0 | 2,720 | VISU |
| 1ST | 8+3/4 | 4+1/2 | 11.6 | 8,871 | 1,425 | 3,300 | 8,871 | CBL |

ADDITIONAL CEMENT

Cement work date: 01/16/2010

Details of work:

| Method used | String | Cementing tool setting/pref depth | Cement volume | Cement top | Cement bottom |
|-------------|--------|-----------------------------------|---------------|------------|---------------|
| | | | | | |

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 | |
| WILLIAMS FORK | 6,125 | 8,252 | <input type="checkbox"/> | <input type="checkbox"/> | |
| CAMEO | 8,252 | 8,680 | <input type="checkbox"/> | <input type="checkbox"/> | |
| ROLLINS | 8,680 | | <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: Joan Proulx

Title: Regulatory Analyst

Date: 10/14/2010

Email: joan_proulx@oxy.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: _____

David S. Nash Director of COGCC

Date: 12/11/2010

Attachment Check List

| Att Doc Num | Name |
|-------------|--------------------|
| 2071984 | DIRECTIONAL SURVEY |
| 400080448 | FORM 5 SUBMITTED |
| 400080457 | LAS-CEMENT BOND |
| 400080458 | LAS-CEMENT BOND |
| 400080459 | LAS-CEMENT BOND |
| 400080461 | LAS-CEMENT BOND |
| 400080463 | LAS-SONIC |
| 400080464 | LAS-SONIC |
| 400080465 | LAS-CEMENT BOND |
| 400080689 | CEMENT JOB SUMMARY |
| 400080691 | DIRECTIONAL SURVEY |

Total Attach: 11 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|--|----------------------------|
| Permit | rec all logs listed, 2547352-55 | 11/9/2010 11:07:37 AM |
| Permit | Rec D/S Profile and logs, 256966-8. D/S profile under attachemtns, D/S values under Well Logs Uploaded. Loc approved by RE | 11/8/2010 9:32:18 AM |
| Permit | Requested hard copy logs & d/s profile, BHL off - sent to permitter for validation. | 11/5/2010 10:42:26 AM |

Total: 3 comment(s)