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 **DRILLING COMPLETION REPORT**		DE	ET	OE	ES

Document Number:

400146111

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   [X] 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   05-123-31535-00   6. County: WELD

7. Well Name: COTTONWOOD   Well Number: 15-33

8. Location: QtrQtr: SWSE   Section: 33   Township: 2N   Range: 66W   Meridian: 6

Footage at surface: Distance: 737 feet   Direction: FSL   Distance: 1865 feet   Direction: FEL

        As Drilled Latitude: 40.089393   As Drilled Longitude: -104.779373

GPS Data:

   Data of Measurement: 01/05/2011   PDOP Reading: 3.0   GPS Instrument Operator's Name: Renee Doiron

   ** If directional footage at Top of Prod. Zone   Dist.: _____ feet. Direction: _____   Dist.: _____ feet. Direction: _____

                Sec: _____   Twp: _____   Rng: _____

   ** If directional footage at Bottom Hole   Dist.: _____ feet. Direction: _____   Dist.: _____ feet. Direction: _____

                Sec: _____   Twp: _____   Rng: _____

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) 12/08/2010 13. Date TD: 12/10/2010 14. Date Casing Set or D&A: 12/11/2010

15. Well Classification:

   [ ] Dry [X] Oil [ ] Gas/Coalbed [ ] Disposal [ ] Stratigraphic [ ] Enhanced Recovery [ ] Storage [ ] Observation

16. Total Depth   MD   7666   TVD** _____   17 Plug Back Total Depth   MD _____   TVD** _____

18. Elevations   GR   4982   KB   4996 | 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:

CD-CN-ML, HRI; CBL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24#	0	986	620	0	986	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,656	1,028	405	7,656	CBL

ADDITIONAL CEMENT

Cement work date: _____

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	
SUSSEX	4,530		☐	☐	
NIOBRARA	7,168		☐	☐	
FORT HAYS	7,472		☐	☐	
CODELL	7,494		☐	☐	

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

Attachment Check List

Att Doc Num	Document Name		attached ?
Attachment Checklist			
	CMT Summary *	Yes ☐	No ☒
	Core Analysis	Yes ☐	No ☒
	Directional Survey **	Yes ☐	No ☒
	DST Analysis	Yes ☐	No ☒
400146116	Logs	Yes ☐	No ☒
	Other	Yes ☐	No ☒

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)