

**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



DE ET OE ES

Document Number:

400176345

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-

5. API Number 05-123-32774-00 6. County: WELD
7. Well Name: SEKICH Well Number: 13-19
8. Location: QtrQtr: SWSE Section: 19 Township: 3N Range: 67W Meridian: 6
Footage at surface: Distance: 227 feet Direction: FSL Distance: 2134 feet Direction: FEL
As Drilled Latitude: 40.204970 As Drilled Longitude: -104.930919

GPS Data:

Data of Measurement: 06/09/2011 PDOP Reading: 2.1 GPS Instrument Operator's Name: Renee Doiron

** If directional footage

at Top of Prod. Zone Distance: 564 feet Direction: FSL Distance: 503 feet Direction: FWL
Sec: 19 Twp: 3N Rng: 67W
at Bottom Hole Distance: 574 feet Direction: FSL Distance: 515 feet Direction: FWL
Sec: 19 Twp: 3N 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) 04/15/2011 13. Date TD: 04/17/2011 14. Date Casing Set or D&A: 04/18/2011

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8435 TVD 7817 17 Plug Back Total Depth MD 8370 TVD 775218. Elevations GR 4907 KB 4922

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

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	
			<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
400173305	LOCATION PICTURES
400173306	REFERENCE AREA PICTURES
400173307	CONST. LAYOUT DRAWINGS
400173308	LOCATION DRAWING
400173310	OTHER
400173331	NRCS MAP UNIT DESC
400173344	MULTI-WELL PLAN
400173356	HYDROLOGY MAP
400174494	OTHER

Total Attach: 9 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)