

**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:

400181951

**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

2. Name of Operator: KERR-MCGEE OIL &amp; GAS ONSHORE LP

3. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

4. Contact Name: Cindy Vue

Phone: (720) 929-6832

Fax: (720) 929-7832

5. API Number 05-123-32612-00

6. County: WELD

7. Well Name: REIGLE

Well Number: 25-4

8. Location: QtrQtr: SENW Section: 4 Township: 2N Range: 65W Meridian: 6

Footage at surface: Distance: 2331 feet Direction: FNL Distance: 2514 feet Direction: FWL

As Drilled Latitude: 40.168266 As Drilled Longitude: -104.669171

GPS Data:

Data of Measurement: 04/19/2011 PDOP Reading: 2.1 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage

at Top of Prod. Zone Distance: 2437 feet Direction: FNL Distance: 2556 feet Direction: FEL

Sec: 4 Twp: 2N Rng: 65W

at Bottom Hole Distance: 2431 feet Direction: FNL Distance: 2555 feet Direction: FEL

Sec: 4 Twp: 2N Rng: 65W

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) 04/09/2011 13. Date TD: 04/11/2011 14. Date Casing Set or D&amp;A: 04/12/2011

15. Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 7405 TVD 7383 17 Plug Back Total Depth MD 7373 TVD 7351

18. Elevations GR 4858 KB 4874

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:

P/E AILC-CNLD-ML-CV; 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	727	460	0	727	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,395	930	210	7,395	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	
PARKMAN	3,955		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,356		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,014		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,209		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,237		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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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
400181956	DIRECTIONAL SURVEY
400181958	CEMENT JOB SUMMARY

Total Attach: 2 Files

### General Comments

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

Total: 0 comment(s)