

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:
400192280

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: CARA MAHLER
 2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6029
 3. Address: P O BOX 173779 Fax: (720) 929-7029
 City: DENVER State: CO Zip: 80217-

5. API Number 05-123-32797-00 6. County: WELD
 7. Well Name: DECHANT Well Number: 3-19HZ
 8. Location: QtrQtr: SWSW Section: 19 Township: 2N Range: 64W Meridian: 6
 Footage at surface: Distance: 374 feet Direction: FSL Distance: 342 feet Direction: FWL
 As Drilled Latitude: 40.117728 As Drilled Longitude: -104.601558

GPS Data:
 Data of Measurement: 05/03/2011 PDOP Reading: 2.9 GPS Instrument Operator's Name: RENEE DOIRON

** If directional footage
 at Top of Prod. Zone Distance: 924 feet Direction: FSL Distance: 1875 feet Direction: FWL
 Sec: 19 Twp: 2N Rng: 64W
 at Bottom Hole Distance: 471 feet Direction: FNL Distance: 1867 feet Direction: FWL
 Sec: 19 Twp: 2N Rng: 64W

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) 02/22/2011 13. Date TD: 03/05/2011 14. Date Casing Set or D&A: 03/08/2011

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 11450 TVD 6948 17 Plug Back Total Depth MD 11423 TVD 6921
 18. Elevations GR 4981 KB 4998 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:
GR-CCL-CB-VDL-SM, GR-DIL-SGR-FM-C

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	9+5/8	40	0	990	500	0	990	CALC
1ST	8+3/4	7+0/0	26	0	7,576	625	0	7,576	CBL
1ST LINER	6+1/8	4+1/2	11.6	6283	11,435				CALC

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	
NIOBRARA	7,294		<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: CARA MAHLER

Title: REGULATORY ANALYST Date: _____ Email: CARA.MAHLER@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
400192287	LAS-
400192288	LAS-MUD
400192289	LAS-
400192290	LAS-CBL 1ST RUN
400192291	DIRECTIONAL SURVEY
400192292	CEMENT JOB SUMMARY

Total Attach: 6 Files

General Comments

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

Total: 0 comment(s)