

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:

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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: Emily Carrender
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6282
3. Address: P O BOX 173779 Fax: (720) 929-7282
City: DENVER State: CO Zip: 80217-

5. API Number 05-123-32277-00 6. County: WELD
7. Well Name: COOLEY Well Number: 23-16
8. Location: QtrQtr: SWSW Section: 16 Township: 2N Range: 68W Meridian: 6
Footage at surface: Distance: 958 feet Direction: FSL Distance: 1157 feet Direction: FWL
As Drilled Latitude: 40.134124 As Drilled Longitude: -105.013524

GPS Data:

Data of Measurement: 10/13/2011 PDOP Reading: 3.1 GPS Instrument Operator's Name: Renee Doiron

** If directional footage at Top of Prod. Zone Dist.: 1323 feet. Direction: FSL Dist.: 2571 feet. Direction: FWL

Sec: 16 Twp: 2N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1320 feet. Direction: FSL Dist.: 2578 feet. Direction: FWL

Sec: 16 Twp: 2N Rng: 68W

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) 08/23/2011 13. Date TD: 08/27/2011 14. Date Casing Set or D&A: 08/28/2011

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 8220 TVD** 7998 17 Plug Back Total Depth MD 8191 TVD** 7969

18. Elevations GR 4885 KB 4899

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:

PRE FORM 5

20. Casing, Liner and Cement:

CASING

Table with 10 columns: Casing Type, Size of Hole, Size of Casing, Wt/Ft, Csg/Liner Top, Setting Depth, Sacks Cmt, Cmt Top, Cmt Bot, Status. Rows include SURF and 1ST.

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 08/28/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	5,449	647	742	5,449

Details of work:

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	3,957		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,450		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	4,890		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,360		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,640		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,660		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,084		<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: Emily Carrender

Title: Operation Specialist I Date: _____ Email: emily.carrender@anadarko.com

The subreport 'subreport3' could not be found at the specified location W:\Inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

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

Total: 0 comment(s)