

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 [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 City: DENVER State: CO Zip: 80217- Fax: (720) 929-7832

5. API Number 05-123-32401-00 6. County: WELD
7. Well Name: MOSER Well Number: 35-4
8. Location: QtrQtr: NESW Section: 4 Township: 2N Range: 65W Meridian: 6
Footage at surface: Distance: 2241 feet Direction: FSL Distance: 2463 feet Direction: FWL
As Drilled Latitude: 40.166676 As Drilled Longitude: -104.669371

GPS Data:
Date of Measurement: 08/10/2011 PDOP Reading: 2.5 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage at Top of Prod. Zone Dist.: 50 feet. Direction: FSL Dist.: 1306 feet. Direction: FWL
Sec: 4 Twp: 2N Rng: 65W
\*\* If directional footage at Bottom Hole Dist.: 47 feet. Direction: FSL Dist.: 1335 feet. Direction: FWL
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) 07/01/2011 13. Date TD: 07/05/2011 14. Date Casing Set or D&A: 07/06/2011

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

16. Total Depth MD 8338 TVD\*\* 7806 17 Plug Back Total Depth MD 8308 TVD\*\* 7776

18. Elevations GR 4859 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:
CD-CN-ML, HRI; CBL

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: 07/06/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	5,745	730	806	5,784

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	4,170		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,696	4,985	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,506		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,725		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,750		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,175		<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

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**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>

Total: 0 comment(s)