

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



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### DRILLING COMPLETION REPORT

Document Number:

400226316

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 05-123-33927-00 6. County: WELD  
 7. Well Name: RIVERBEND Well Number: 25-19  
 8. Location: QtrQtr: SWSW Section: 19 Township: 1N Range: 66W Meridian: 6  
 Footage at surface: Distance: 989 feet Direction: FSL Distance: 1038 feet Direction: FWL  
 As Drilled Latitude: 40.032203 As Drilled Longitude: -104.825928

GPS Data:  
Data of Measurement: 09/28/2011 PDOP Reading: 1.9 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage at Top of Prod. Zone Dist.: 2594 feet. Direction: FSL Dist.: 2675 feet. Direction: FWL  
Sec: 19 Twp: 1N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 2611 feet. Direction: FSL Dist.: 2675 feet. Direction: FWL  
Sec: 19 Twp: 1N Rng: 66W

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) 09/02/2011 13. Date TD: 09/05/2011 14. Date Casing Set or D&A: 09/07/2011

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

16. Total Depth MD 8582 TVD\*\* 8130 17 Plug Back Total Depth MD 8552 TVD\*\* 8100

18. Elevations GR 4929 KB 4944 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:  
 CBL  
 NO OPEN HOLE LOGS PLANNED FOR THIS WELL.

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	1,010	640	15	1,010	CALC
1ST	7+7/8	4+1/2	11.6#	0	8,568	42	8,288	8,568	CBL

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 09/07/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	8,276	1,011	1,700	8,276

Details of work:

21. Formation log intervals and test zones:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	4,573		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,958		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,670		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,968		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,979		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,416		<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**

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

Total: 0 comment(s)