

**FORM**  
**5**  
Rev  
02/08

**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

2287629

Date Received:

02/24/2012

**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: <u>96850</u>	4. Contact Name: <u>ANGELA NEIFERT-KRAISER</u>
2. Name of Operator: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Phone: <u>(303) 606-4398</u>
3. Address: <u>1001 17TH STREET - SUITE #1200</u>	Fax: <u>(303) 629-8272</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-045-19394-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>Federal</u>	Well Number: <u>PA 422-29</u>
8. Location: QtrQtr: <u>SENE</u> Section: <u>29</u> Township: <u>6S</u> Range: <u>95W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>1638</u> feet Direction: <u>FNL</u> Distance: <u>1079</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: <u>39.497963</u> As Drilled Longitude: <u>-108.016140</u>	

GPS Data:

Data of Measurement: 11/05/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: JACK KIRKPATRICK

\*\* If directional footage at Top of Prod. Zone Dist.: 1897 feet. Direction: FNL Dist.: 1873 feet. Direction: FWL

Sec: 29 Twp: 6S Rng: 95W

\*\* If directional footage at Bottom Hole Dist.: 1906 feet. Direction: FNL Dist.: 1857 feet. Direction: FWL

Sec: 29 Twp: 6S Rng: 95W

9. Field Name: PARACHUTE 10. Field Number: 67350

11. Federal, Indian or State Lease Number: 62162

12. Spud Date: (when the 1st bit hit the dirt) 06/05/2011 13. Date TD: 06/11/2011 14. Date Casing Set or D&A: 06/12/2011

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8441 TVD\*\* 7813 17 Plug Back Total Depth MD 8255 TVD\*\* 7627

18. Elevations GR 5895 KB 5921

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 AND RESERVOIR PERFORMANCE MONITOR (RPM),MUD

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
CONDUCTOR	24	18		0	130	49	0	130	VISU
SURF	13+1/2	9+5/8		0	2,819	660	0	2,819	VISU
1ST	8+3/4	4+1/2		0	8,424	965	3,830	8,424	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	
WASATCH G	2,560		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	5,007		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	7,757		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,348		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 5A DOC#2287627

FORMATION LOG INTERVALS AND TEST ZONES COMMENTS: SURFACE PRESSURE = 0#

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: ANGELA J. NEIFERT-KRAISER

Title: REGULATORY Date: 2/1/2012 Email: ANGELA.NEIFERT-KRAISER@WILLIAMS.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
2287631	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2287630	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
2287629	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400275632	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	added MUD to list of logs. all LAS logs rec'd. approved form 5 without paper RPM log. WPX submitting soon.	4/23/2012 3:28:02 PM

Total: 1 comment(s)