

FORM
5Rev
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



DE ET OE ES

Document Number:

400291215

Date Received:

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: 96850

4. Contact Name: Angela Neifert-Kraiser

2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Phone: (303) 606-4398

3. Address: 1001 17TH STREET - SUITE #1200

Fax:

City: DENVER State: CO Zip: 80202

5. API Number 05-045-11968-00

6. County: GARFIELD

7. Well Name: WILLIAMS

Well Number: PA 13-6

8. Location: QtrQtr: NESE Section: 1 Township: 7S Range: 96W Meridian: 6

Footage at surface: Distance: 1558 feet Direction: FSL Distance: 352 feet Direction: FEL

As Drilled Latitude: 39.464044 As Drilled Longitude: -108.050536

GPS Data:

Data of Measurement: 07/19/2006 PDOP Reading: 2.6 GPS Instrument Operator's Name: Ivan Martin

** If directional footage at Top of Prod. Zone Dist.: 1780 feet. Direction: FSL Dist.: 1059 feet. Direction: FWL

Sec: 6 Twp: 7s Rng: 95w

** If directional footage at Bottom Hole Dist.: 1779 feet. Direction: FSL Dist.: 1053 feet. Direction: FWL

Sec: 6 Twp: 7s Rng: 95w

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 03/29/2006 13. Date TD: 04/09/2006 14. Date Casing Set or D&A: 04/12/2006

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 6800 TVD** 6500 17 Plug Back Total Depth MD 6748 TVD** 6348

18. Elevations GR 7060 KB 7086

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:

SP/GR/HDIL/ZDL/CN and CBL

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	13+1/2	9+5/8	32.3	0	1,134	375	0	1,134	VISU
1ST	7+7/8	4+1/2	11.6	0	6,780	835	3,270	6,780	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 01/20/2012

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	5,023	100	5,007	5,023
SQUEEZE	1ST	2,369	550	2,460	2,475

Details of work:

Casing leak found to be between 2460' & 2475' using plug and packer to isolate. POOH w/ plug and packer. RIH w/ RBP and set @ 2671' and pkr @ 2660', pressure test good. Pull pkr up hole to set @ 2398' and broke circulating through leak to surface through bradenhead. POOH w/ pkr and wait on cement crew.
 RIH to set cmt retainer @ 2368' and pump injection test. Mix and pump 550 sks of 15.8# Class G cement and tail in with 50 sks of 17# Class G cement. Displaced cement with 10.75 BBL of water and squeeze cement to 891 psi. Sting out of cmt retainer and reverse out with remaining ¼ BBL of cement. Shut down rig crew and allowed cement to set up for 42 hrs.
 RIH w/ 3 7/8" rock bit and drilled cmt retainer out from 2368' to 2370'. Drilled cement from 2370' to 2479' and fell through. Pressure tested squeeze to 1500 psi for 15 min, test good. POOH w/ bit and RIH w/ retrieving head to release RBP @ 2671'. POOH w/ retrieving head and RBP.
 RU wireline crew to run CBL from 4350' to surface showing new cement top @ 430' and excellent bond to 792'. RIH w/ 2 3/8" tbg and set @ 6150', RDMO.

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	1,456		<input type="checkbox"/>	<input type="checkbox"/>	
FORT UNION	1,993		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	3,730		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	6,228		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	6,781		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

updated form 5 and 5A after squeezes

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

Signed: _____ Print Name: Angela Neifert-Kraiser

Title: Regulatory Specialist Date: _____ Email: Angela.Neifert-Kraiser@wpenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400291239	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400291262	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400291240	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)