State of Colorado
Oil and Gas Conservation Commission

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

DRILLING COMPLETION REPORT

Document Number: 400324743

Date Received:

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: JOEL MALEFYT
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
Phone: (720) 929-6828
3. Address: P O BOX 173779
Fax: (720) 929-7828
City: DENVER State: CO Zip: 80217-

5. API Number 05-123-22829-00
6. County: WELD
7. Well Name: JEPSEN Well Number: 14-2
8. Location: QtrQtr: SESW Section: 2 Township: 3N Range: 65W Meridian: 6
Footage at surface: Distance: 470 feet Direction: FSL Distance: 2180 feet Direction: FWL
As Drilled Latitude: 40.248415 As Drilled Longitude: -104.632029

GPS Data:
Data of Measurement: 02/08/2012 PDOP Reading: 2.8 GPS Instrument Operator's Name: Steve Fisher

** If directional footage at Top of Prod. Zone Dist.: ___ feet. Direction: ___ Dist.: ___ feet. Direction: ___
Sec: ___ Twp: ___ Rng: ___
** If directional footage at Bottom Hole Dist.: ___ feet. Direction: ___ Dist.: ___ feet. Direction: ___
Sec: ___ Twp: ___ Rng: ___

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) 04/04/2005 13. Date TD: 04/08/2005 14. Date Casing Set or D&A: 04/20/2005

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

16. Total Depth MD 7221 TVD** ___ 17 Plug Back Total Depth MD 7182 TVD** ___

18. Elevations GR 4770 KB 4782 | 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

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	630	445	0	630	CALC
1ST	7+7/8	4+1/2	11.6#	0	7,210	640	3,822	7,210	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:	10/12/2011					

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF	0	620	0	3,711

Details of work:

10/12/2011 -ANNULAR FILL

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	
SUSSEX	4,345		☐	☐	
NIOBRARA	6,790		☐	☐	
FORT HAYS	7,038		☐	☐	
CODELL	7,062		☐	☐	

Comment:

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

Signed: _____   Print Name: JOEL MALEFYT

Title: REGULATORY ANALYST   Date: _____   Email: JOEL.MALEFYT@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
400324769	CMT Summary *	Yes ☒ No ☐
	Core Analysis	Yes ☐ No ☒
	Directional Survey **	Yes ☐ No ☒
	DST Analysis	Yes ☐ No ☒
	Logs	Yes ☐ No ☒
	Other	Yes ☐ No ☒

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)