

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:

400474864

Date Received:

09/04/2013

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: 47120

4. Contact Name: REBECCA HEIM

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6361

3. Address: P O BOX 173779

Fax: (720) 929-7361

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-19561-00

6. County: WELD

7. Well Name: HSR-FT VASQUEZ

Well Number: 1-36A

8. Location: QtrQtr: NENE Section: 36 Township: 3N Range: 67W Meridian: 6

Footage at surface: Distance: 460 feet Direction: FNL Distance: 660 feet Direction: FEL

As Drilled Latitude: 40.187123 As Drilled Longitude: -104.832229

GPS Data:

Date of Measurement: 06/05/2006 PDOP Reading: 2.5 GPS Instrument Operator's Name: Chris 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) 03/09/1998 13. Date TD: 14. Date Casing Set or D&A:

15. Well Classification:

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

16. Total Depth MD 7922 TVD** 17 Plug Back Total Depth MD 7870 TVD**

18. Elevations GR 4803 KB 4814

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:

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	538	430	0	538	

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 08/19/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	3,769	50	3,496	3,769

Details of work:

CT to loc.Pessures 0,SCP:under vacuum.TIH w/ pkr. Found holes between 3496-3769'.
 PU to 3340',set pkr.Circ. annulus clean.MIRU Cementers,pump 50SCKS ,15.8ppg,
 1.15YLD,Class G cement,disp.13.5bbls,water.PU 7stds.reset pkr,reverse out
 30bbls.

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	
			<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORM 5 FOR CEMENT JOB. VERBAL APPROVAL ATTACHED AS "OTHER". PLEASE NOTE THAT ALTHOUGH DIANA'S APPROVAL SAID NO REMEDIAL CEMENTING REQUEMENTS FOR THIS WELL, SINCE IT WAS NECESSARY TO USE 50 SACKS OF CEMENT INSTEAD OF 25 SACKS, WE FELT WE SHOULD FILE THIS FORM 5.

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

Signed: _____ Print Name: REBECCA HEIM

Title: REGULATORY Date: 9/4/2013 Email: rscdjpostdrill@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?
Attachment Checklist		
400474875	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"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400474883	Other	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Other Attachments		
400474864	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400474873	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400474880	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400474886	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Engineer	requested referenced gyro	9/7/2013 4:32:47 PM

Total: 1 comment(s)