

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:

400481319

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: 19160

4. Contact Name: Dave Banko

2. Name of Operator: CONOCO PHILLIPS COMPANY

Phone: (303) 820-4480

3. Address: P O BOX 2197

Fax: (303) 820-4124

City: HOUSTON State: TX Zip: 77252-

5. API Number 05-005-07203-00

6. County: ARAPAHOE

7. Well Name: Walker 12

Well Number: 1H

8. Location: QtrQtr: SESE Section: 12 Township: 4s Range: 64w Meridian: 6

Footage at surface: Distance: 660 feet Direction: FSL Distance: 250 feet Direction: FEL

As Drilled Latitude: 39.710797 As Drilled Longitude: -104.490761

GPS Data:

Date of Measurement: 09/16/2013 PDOP Reading: 1.2 GPS Instrument Operator's Name: Dave Swanson

** 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: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 05/17/2013 13. Date TD: 05/22/2013 14. Date Casing Set or D&A: 05/24/2013

15. Well Classification:

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

16. Total Depth MD 7786 TVD** 17 Plug Back Total Depth MD 6623 TVD**

18. Elevations GR 5712 KB 5736

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:

Triple Combo/GR from TD to surface

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	16	CMP	0	100	200	0	100	VISU
SURF	13+1/2	9+5/8	36	0	1,970	1,040	0	1,970	VISU
OPEN HOLE	8+3/4			1970	7,786				

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 05/24/2013

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	OPEN HOLE	6,805	320	6,623	7,743

Details of work:

Drilled surface bore, set 9 5/8" casing to 1,970'. Drilled 8 3/4" pilot bore to TD of 7,786', logged. Set whipstock and 2 7/8" tailpipe, top of whipstock at 6,805', bottom of tailpipe at 7,743'. Cemented balanced plug from bottom at 7,743' to top at 6,805' with 320 sxs Plugcem Class G, 15.8 ppg, 1.52 yield.

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	
PIERRE	1,765		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,188	7,244	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,244	7,576	<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,576	7,604	<input type="checkbox"/>	<input type="checkbox"/>	
CARLILE	7,604	7,674	<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,674	7,786	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Logs and attachments uploaded by ConocoPhillips. For direct contact with ConocoPhillips, Reba Tidwell, 281-467-1856, email: rebecca.draehn@cop.com.

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

Signed: _____

Print Name: David F. Banko

Title: Permit Agent

Date: _____

Email: dave@banko1.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400491106	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400489829	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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400486803	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400486807	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400486808	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400488388	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491090	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491091	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491093	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491094	PDF-SONIC	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491096	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400491101	PDS-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

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

Total: 0 comment(s)