

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:

400563194

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: GINA RANDOLPH

2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Phone: (303) 260-4509

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

Fax: (303) 629-8268

City: DENVER State: CO Zip: 80202

5. API Number 05-103-11957-00

6. County: RIO BLANCO

7. Well Name: federal

Well Number: RGU 431-27-198

8. Location: QtrQtr: LOT6 Section: 27 Township: 1S Range: 98W Meridian: 6

Footage at surface: Distance: 2070 feet Direction: FNL Distance: 2151 feet Direction: FWL

As Drilled Latitude: 39.936229 As Drilled Longitude: -108.379909

## GPS Data:

Data of Measurement: 07/03/2013 PDOP Reading: 1.8 GPS Instrument Operator's Name: W. KIRKPATRICK

\*\* If directional footage at Top of Prod. Zone Dist.: 1016 feet. Direction: FNL Dist.: 1806 feet. Direction: FEL

Sec: 27 Twp: 1S Rng: 98W

\*\* If directional footage at Bottom Hole Dist.: 1042 feet. Direction: FNL Dist.: 1863 feet. Direction: FEL

Sec: 27 Twp: 1S Rng: 98W

9. Field Name: SULPHUR CREEK

10. Field Number: 80090

11. Federal, Indian or State Lease Number: COC50701

12. Spud Date: (when the 1st bit hit the dirt) 07/30/2013 13. Date TD: 09/10/2013 14. Date Casing Set or D&amp;A: 09/11/2013

## 15. Well Classification:

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

16. Total Depth MD 12280 TVD\*\* 12064 17 Plug Back Total Depth MD 12230 TVD\*\* 12014

18. Elevations GR 6560 KB 6581

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:

RPM/CBL/MUDLOGS

\*\*NOTE: LAS\_SENT\_TO\_COGCC\_BY GTECH\_10/16/2013 IN PDF FORMAT.

## 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	30	18	48	0	84	31	0	84	
SURF	14+3/4	9+5/8	36	0	3,788	1,730	0	3,788	
1ST	8+3/4	4+1/2	11.6	0	12,270	1,695	6,541	12,270	

### STAGE/TOP OUT/REMEDIAL CEMENT

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

Method used	String	Cementing tool setting/perf 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	5,418		<input type="checkbox"/>	<input type="checkbox"/>	
MESAVERDE	7,578		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	10,480		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	11,081		<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	11,211		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	11,441		<input type="checkbox"/>	<input type="checkbox"/>	
SEGO	12,051		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Please note: The "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

Surface Pressure = 0

**\*\*NOTE: LAS\_SENT\_TO\_COGCC\_BY GTECH\_10/16/2013 IN PDF FORMAT.**

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

Signed: \_\_\_\_\_ Print Name: GINA RANDOLPH

Title: PERMIT TECH II Date: \_\_\_\_\_ Email: GINA.RANDOLPH@WPXENERGY.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400563222	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400563223	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"/>
<u>Other Attachments</u>					
400563220	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400563224	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

## General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)