

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:

400578832

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: 47120

4. Contact Name: Katie Kistner

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

Phone: (720) 9294317

3. Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-38390-00

6. County: WELD

7. Well Name: XCEL

Well Number: 12N-22HZ

8. Location: QtrQtr: SWSW Section: 27 Township: 1N Range: 67W Meridian: 6

Footage at surface: Distance: 496 feet Direction: FSL Distance: 403 feet Direction: FWL

As Drilled Latitude: 40.016187 As Drilled Longitude: -104.884611

## GPS Data:

Data of Measurement: 11/22/2013 PDOP Reading: 1.6 GPS Instrument Operator's Name: Renee Doiron

\*\* If directional footage at Top of Prod. Zone Dist.: 722 feet. Direction: FSL Dist.: 848 feet. Direction: FWL

Sec: 27 Twp: 1N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 2170 feet. Direction: FSL Dist.: 760 feet. Direction: FWL

Sec: 22 Twp: 1N Rng: 67W

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) 11/19/2013 13. Date TD: 01/19/2014 14. Date Casing Set or D&amp;A: 01/21/2014

## 15. Well Classification:

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

16. Total Depth MD 14685 TVD\*\* 7489 17 Plug Back Total Depth MD 14659 TVD\*\* 7494

18. Elevations GR 5026 KB 5042

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, GR, MUD

## 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	36	0	1,070	400	0	1,070	VISU
1ST	8+3/4	7	26	0	7,990	795	1,160	7,990	CBL
1ST LINER	6+1/8	4+1/2	11.6	6879	14,670				CALC

## 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	
SUSSEX	4,832		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,372		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,449		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,476		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: \_\_\_\_\_

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.

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

Signed: \_\_\_\_\_ Print Name: Katie KistnerTitle: Regulatory Analyst Date: \_\_\_\_\_ Email: katie.kistner@anadarko.com

### Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400578875	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400578874	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>					
400578867	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400578868	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400578869	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400578870	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400578871	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400578873	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400582914	PDF-CEMENT BOND	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)