

**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



DE ET OE ES

Document Number:

400643935

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 05-123-39394-00

6. County: WELD

7. Well Name: BENSON FARMS

Well Number: 23C-19HZ

8. Location: QtrQtr: NWSW Section: 24 Township: 3N Range: 68W Meridian: 6

Footage at surface: Distance: 2045 feet Direction: FSL Distance: 50 feet Direction: FWL

As Drilled Latitude: 40.209980 As Drilled Longitude: -104.960551

## GPS Data:

Date of Measurement: 08/04/2014 PDOP Reading: 1.5 GPS Instrument Operator's Name: Ryan Scheuerman

\*\* If directional footage at Top of Prod. Zone Dist.: 1686 feet. Direction: FSL Dist.: 487 feet. Direction: FWL

Sec: 24 Twp: 3N Rng: 68W

\*\* If directional footage at Bottom Hole Dist.: 1735 feet. Direction: FSL Dist.: 2025 feet. Direction: FWL

Sec: 19 Twp: 3N Rng: 68W

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) 06/08/2014 13. Date TD: 06/28/2014 14. Date Casing Set or D&amp;A: 06/30/2014

## 15. Well Classification:

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

16. Total Depth MD 14517 TVD\*\* 7290 17 Plug Back Total Depth MD 14459 TVD\*\* 7290

18. Elevations GR 4957 KB 4973

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	1,226	460	0	1,226	VISU
1ST	8+3/4	7	26	0	7,682	720	230	7,682	CBL
1ST LINER	6+1/8	4+1/2	11.6	6570	14,507	540	6,570	14,507	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	4,154		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	7,061		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,135		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,506		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,591		<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>					
400660525	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400643952	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>					
400643942	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643945	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643946	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400643949	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400672906	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)