

FORM  
5Rev  
09/14

## 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:

400686587

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

OGCC Operator Number: 19160

Contact Name: Ali Savage

Name of Operator: CONOCO PHILLIPS COMPANY

Phone: (281) 2065359

Address: P O BOX 2197

Fax: (281) 2065721

City: HOUSTON State: TX Zip: 77252-

API Number 05-005-07222-00

County: ARAPAHOE

Well Name: State Elbert

Well Number: 1H

Location: QtrQtr: SENE Section: 2 Township: 5S Range: 65W Meridian: 6

Footage at surface: Distance: 1367 feet Direction: FNL Distance: 387 feet Direction: FEL

As Drilled Latitude: 39.649069 As Drilled Longitude: -104.623864

## GPS Data:

Date of Measurement: 09/09/2014 PDOP Reading: 1.4 GPS Instrument Operator's Name: Dallas Nielsen

\*\* If directional footage at Top of Prod. Zone Dist.: 669 feet. Direction: FNL Dist.: 617 feet. Direction: FWL

Sec: 1 Twp: 5S Rng: 65W

\*\* If directional footage at Bottom Hole Dist.: 681 feet. Direction: FNL Dist.: 621 feet. Direction: FEL

Sec: 1 Twp: 5S Rng: 65W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: 1960.12

Spud Date: (when the 1st bit hit the dirt) 07/29/2014 Date TD: 08/28/2014 Date Casing Set or D&amp;A: 08/30/2014

Rig Release Date: 08/31/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 12263 TVD\*\* 7817 Plug Back Total Depth MD 12209 TVD\*\* 7816

Elevations GR 5858 KB 5882 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

LWD, Mud, CBL

## CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	CMP	0	100	50	0	100	VISU
SURF	13+1/2	9+5/8	36	0	2,239	700	0	2,239	VISU
1ST LINER	8+3/4	5+1/2	23	0	12,209	1,595	1,950	12,263	CBL

## 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:

## FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SHANNON	5,160		NO	NO	
SUSSEX	5,444		NO	NO	
SHARON SPRINGS	7,850		NO	NO	
NIOBRARA	8,040		NO	NO	

Comment:

This well shares a pad with the State Massive 1H.

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

Signed: \_\_\_\_\_

Print Name: Ali Savage

Title: Regulatory Specialist Date: \_\_\_\_\_ Email: ali.savage@conocophillips.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400699673	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400692188	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>			
400699647	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699648	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699649	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699651	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699654	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699655	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699658	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699689	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400699692	DIRECTIONAL DATA	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)