

**FORM**  
**5**  
Rev  
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:  
400697755

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: 47120 Contact Name: Kayla Hamilton  
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6552  
 Address: P O BOX 173779 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80217-

API Number 05-123-37909-00 County: WELD  
 Well Name: HOWARD Well Number: 29C-29HZ  
 Location: QtrQtr: SWNW Section: 32 Township: 1N Range: 67W Meridian: 6  
 Footage at surface: Distance: 2287 feet Direction: FNL Distance: 450 feet Direction: FWL  
 As Drilled Latitude: 40.008551 As Drilled Longitude: -104.922142

GPS Data:  
 Date of Measurement: 06/25/2014 PDOP Reading: 1.6 GPS Instrument Operator's Name: Carli Sloan

\*\* If directional footage at Top of Prod. Zone Dist.: 2065 feet. Direction: FNL Dist.: 1042 feet. Direction: FWL  
 Sec: 32 Twp: 1N Rng: 67W  
 \*\* If directional footage at Bottom Hole Dist.: 1 feet. Direction: FNL Dist.: 1049 feet. Direction: FWL  
 Sec: 29 Twp: 1N Rng: 67W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 06/20/2014 Date TD: 08/21/2014 Date Casing Set or D&A: 08/23/2014  
 Rig Release Date: 08/24/2014 Per Rule 308A.b.

Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

Total Depth MD 15599 TVD\*\* 7792 Plug Back Total Depth MD 15547 TVD\*\* 7792

Elevations GR 5031 KB 5056 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
GR, CBL, MUD

**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
SURF	13+1/2	9+5/8	36	0	998	400	0	998	VISU
1ST	8+3/4	7	26	0	8,251	710	50	13,282	CBL
1ST LINER	6+1/8	4+1/2	11.6	7149	15,595	560	7,247	15,595	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:

## 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	
SUSSEX	4,837				
SHARON SPRINGS	7,529				
NIOBRARA	7,563				
FORT HAYS	9,193				Due to faulting we were unable to measure formation top. This is the depth at which we first drilled into the formation.
CODELL	9,228				Due to faulting we were unable to measure formation top. This is the depth at which we first drilled into the formation.

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: Kayla Hamilton

Title: Regulatory Specialist Date: \_\_\_\_\_ Email: kayla.hesseltine@anadarko.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400701662	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400697780	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"/>
<b>Other Attachments</b>			
400697772	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400697773	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400697775	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400697779	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400706411	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)