

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:

400715632

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: 96850

Contact Name: GINA RANDOLPH

Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC

Phone: (303) 260-4509

Address: 1001 17TH STREET - SUITE #1200

Fax: (303) 629-8268

City: DENVER State: CO Zip: 80202

API Number 05-045-22428-00

County: GARFIELD

Well Name: C&amp;C Energy GM

Well Number: 444-12

Location: QtrQtr: SWSW Section: 12 Township: 7S Range: 96W Meridian: 6

Footage at surface: Distance: 255 feet Direction: FSL Distance: 1057 feet Direction: FWL

As Drilled Latitude: 39.445567 As Drilled Longitude: -108.064395

## GPS Data:

Date of Measurement: 04/03/2014 PDOP Reading: 2.2 GPS Instrument Operator's Name: J. KIRKPATRICK

\*\* If directional footage at Top of Prod. Zone Dist.: 565 feet. Direction: FSL Dist.: 893 feet. Direction: FEL

Sec: 12 Twp: 7S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 568 feet. Direction: FSL Dist.: 856 feet. Direction: FEL

Sec: 12 Twp: 7S Rng: 96W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/29/2014 Date TD: 08/04/2014 Date Casing Set or D&amp;A: 08/06/2014

Rig Release Date: 08/06/2014 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 7680 TVD\*\* 6184 Plug Back Total Depth MD 7637 TVD\*\* 6141

Elevations GR 5141 KB 5165 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

RPM CBL MUDLOGS

## 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	18	48	0	44	16	0	44	VISU
SURF	13+1/2	9+5/8	32.3	0	1,661	390	0	1,661	VISU
1ST	8+3/4	4+1/2	11.6	0	7,667	984	3,759	7,667	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	
WASATCH G	1,090			NO	
MESAVERDE	4,477			NO	
CAMEO	6,997			NO	
ROLLINS	7,502			NO	

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

**\*\*ONGOING DRILLING ON THIS PAD, RIG HAS NOT BEEN RELEASED FROM PAD; GM 24-12**

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>		
400715786	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400715785	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>		
400715755	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400715771	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400715773	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400715784	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400715789	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400715797	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)