

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:
400795730

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: Michele Weybright
 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 629-8449
 Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268
 City: DENVER State: CO Zip: 80202

API Number 05-045-22465-00 County: GARFIELD
 Well Name: GM Well Number: 342-12
 Location: QtrQtr: NENW Section: 12 Township: 7S Range: 96W Meridian: 6
 Footage at surface: Distance: 1186 feet Direction: FNL Distance: 1918 feet Direction: FWL
 As Drilled Latitude: 39.456420 As Drilled Longitude: -108.061444

GPS Data:
 Date of Measurement: 09/25/2014 PDOP Reading: 2.0 GPS Instrument Operator's Name: J. KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 1563 feet. Direction: FNL Dist.: 1146 feet. Direction: FEL
 Sec: 12 Twp: 7S Rng: 96W

** If directional footage at Bottom Hole Dist.: 1590 feet. Direction: FNL Dist.: 1146 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) 11/15/2014 Date TD: 11/22/2014 Date Casing Set or D&A: 11/22/2014
 Rig Release Date: 12/24/2014 Per Rule 308A.b.

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

Total Depth MD 7090 TVD** 6304 Plug Back Total Depth MD 7047 TVD** 6261

Elevations GR 5125 KB 5151 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, MUD, AND RESERVOIR PERFORMANCE MONITOR (RPM)

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	42	16	0	42	VISU
SURF	13+1/2	9+5/8	32.3	0	1,750	390	0	1,750	VISU
1ST	8+3/4	4+1/2	11.6	0	7,080	1,095	2,850	7,080	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	1,318			NO	
MESAVERDE	3,936			NO	
CAMEO	6,449			NO	
ROLLINS	6,965			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

Logs uploaded 4-9-2015.

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

Signed: _____

Print Name: Michele L Weybright

Title: Permit Technician I Date: _____ Email: michele.veybright@wpenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400795772	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400795770	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"/>
Other Attachments			
400795752	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400795757	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400795760	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400795764	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400795774	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)