

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



DE ET OE ES

Document Number:

400804036

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: 96155

Contact Name: Elvera Berryman

Name of Operator: WHITING OIL & GAS CORPORATION

Phone: (303) 390-4221

Address: 1700 BROADWAY STE 2300

Fax: (303) 390-1598

City: DENVER State: CO Zip: 80290

API Number 05-123-38730-00

County: WELD

Well Name: Razor

Well Number: 11G-0210B

Location: QtrQtr: SWNE Section: 11 Township: 10N Range: 58W Meridian: 6

Footage at surface: Distance: 2321 feet Direction: FNL Distance: 1749 feet Direction: FEL

As Drilled Latitude: 40.854249 As Drilled Longitude: -103.829545

GPS Data:

Date of Measurement: 03/24/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Larry D. Brown

** If directional footage at Top of Prod. Zone Dist.: 2566 feet. Direction: FNL Dist.: 2197 feet. Direction: FEL

Sec: 11 Twp: 10N Rng: 58W

** If directional footage at Bottom Hole Dist.: 940 feet. Direction: FNL Dist.: 2190 feet. Direction: FEL

Sec: 10 Twp: 10N Rng: 58W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/03/2015 Date TD: 03/09/2015 Date Casing Set or D&A: 03/07/2015

Rig Release Date: 03/09/2015 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 8160 TVD** 1378 Plug Back Total Depth MD 8160 TVD** 1378

Elevations GR 4973 KB 4990 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

LWD, Mud (Note: Logging Waiver, Neutron log run on Razor 11G-1409A)

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	20	16	84	0	97		0	97	VISU
SURF	13+1/2	9+5/8	36	0	1,877	836	0	1,877	VISU
1ST	8+3/4	7	29	0	6,534	563	0	6,534	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	
PIERRE	1,520		NO	NO	
HYGIENE	3,820		NO	NO	
SHARON SPRINGS	5,800		NO	NO	
NIOBRARA	5,808		NO	NO	
FORT HAYS	6,111		NO	NO	

Comment:

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

Signed: _____

Print Name: Elvera Berryman

Title: Engineering Technician

Date: _____

Email: elvera.berryman@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400804043	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400829336	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>			
400827393	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400827394	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400827395	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400827396	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400829337	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)