

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:
400863338

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: Anna Cillo
 Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 390-1328
 Address: 1700 BROADWAY STE 2300 Fax: _____
 City: DENVER State: CO Zip: 80290

API Number 05-123-41021-00 County: WELD
 Well Name: Horsetail Well Number: 08D-1703
 Location: QtrQtr: NWNW Section: 8 Township: 10N Range: 57W Meridian: 6
 Footage at surface: Distance: 380 feet Direction: FNL Distance: 560 feet Direction: FWL
 As Drilled Latitude: 40.859770 As Drilled Longitude: -103.783400

GPS Data:
 Date of Measurement: 03/24/2015 PDOP Reading: 2.1 GPS Instrument Operator's Name: Larry Brown

** If directional footage at Top of Prod. Zone Dist.: 758 feet. Direction: FNL Dist.: 963 feet. Direction: FWL
 Sec: 8 Twp: 10N Rng: 57W
 ** If directional footage at Bottom Hole Dist.: 134 feet. Direction: FSL Dist.: 830 feet. Direction: FWL
 Sec: 17 Twp: 10N Rng: 57W

Field Name: WILDCAT Field Number: 99999
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 04/30/2015 Date TD: 05/11/2015 Date Casing Set or D&A: 05/14/2015
 Rig Release Date: 05/17/2015 Per Rule 308A.b.

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

Total Depth MD 15875 TVD** 5743 Plug Back Total Depth MD 15875 TVD** 5743
 Elevations GR 4962 KB 4983 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
LWD, Mud, CBL (Note: Logging waiver, Neutron log run on Horsetail 08D-1704)

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	24	16	65	0	101		0	101	VISU
SURF	13+1/2	9+5/8	36	0	1,663	732	0	1,663	VISU
1ST	8+3/4	7	29	0	6,130	583	0	6,130	CBL
1ST LINER	6+1/8	4+1/2	11.6	4964	15,865				

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	1,627		NO	NO	
HYGIENE	3,607		NO	NO	
SHARON SPRINGS	5,587		NO	NO	
NIOBRARA	5,598		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: Anna Cillo

Title: Engineering Technician

Date: _____

Email: anna.cillo@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400867746	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400867750	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			
400867542	PDF-CBL 3RD RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400867734	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400867735	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400867736	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400867737	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400868425	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)