

**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.

Document Number:  
400840757

Date Received:

Completion Type  Final completion  Preliminary completion

OGCC Operator Number: 47120 Contact Name: Kayla Hesseltnie

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 05-123-40844-00 County: WELD

Well Name: HUNZIKER Well Number: 1N-28HZ

Location: QtrQtr: SWSE Section: 28 Township: 2N Range: 67W Meridian: 6

Footage at surface: Distance: 433 feet Direction: FSL Distance: 1623 feet Direction: FEL

As Drilled Latitude: 40.103233 As Drilled Longitude: -104.892069

GPS Data:  
Date of Measurement: 06/01/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Carli Sloan

\*\* If directional footage at Top of Prod. Zone Dist.: 185 feet. Direction: FSL Dist.: 1058 feet. Direction: FEL

Sec: 28 Twp: 2N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 485 feet. Direction: FNL Dist.: 1095 feet. Direction: FEL

Sec: 28 Twp: 2N Rng: 67W

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 01/15/2015 Date TD: 04/06/2015 Date Casing Set or D&A: 04/07/2015

Rig Release Date: 05/29/2015 Per Rule 308A.b.

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

Total Depth MD 12676 TVD\*\* 7516 Plug Back Total Depth MD 12676 TVD\*\* 7516

Elevations GR 5050 KB 5070 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
cbl, gr

**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	16	42.1	0	40	32	0	40	VISU
SURF	13+1/2	9+5/8	36	0	1,328	516	0	1,328	VISU
1ST	8+3/4	7	26	0	8,076	750	8	8,076	CBL
1ST LINER	6+1/8	4+1/2	11.6	7040	12,667				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	4,623				
SHARON SPRINGS	7,528				
NIOBRARA	7,647				

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 Hesseltine

Title: Regulatory Specialist

Date: \_\_\_\_\_

Email: kayla.hesseltine@anadarko.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400840775	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400840774	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>			
400840764	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400840765	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400840771	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400871033	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)