

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



Document Number:

400631241

Date Received:

08/26/2014

## DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 47120

Contact Name: Katie Kistner

Name of Operator: KERR MCGEE OIL &amp; GAS ONSHORE LP

Phone: (720) 9294317

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

API Number 05-123-39293-00

County: WELD

Well Name: NRC

Well Number: 29N-32HZ

Location: QtrQtr: NENW Section: 8 Township: 1N Range: 67W Meridian: 6

Footage at surface: Distance: 612 feet Direction: FNL Distance: 2035 feet Direction: FWL

As Drilled Latitude: 40.071168 As Drilled Longitude: -104.916636

## GPS Data:

Date of Measurement: 08/12/2014 PDOP Reading: 1.8 GPS Instrument Operator's Name: Ryan Scheuerman

\*\* If directional footage at Top of Prod. Zone Dist.: 52 feet Direction: FSL Dist.: 1509 feet Direction: FWL

Sec: 5 Twp: 1N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 17 feet Direction: FNL Dist.: 1531 feet Direction: FWL

Sec: 32 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) 05/04/2014 Date TD: 05/27/2014 Date Casing Set or D&amp;A: 05/29/2014

Rig Release Date: Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 18522 TVD\*\* 7460 Plug Back Total Depth MD 18462 TVD\*\* 7462

Elevations GR 5035 KB 5060 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

## List Electric Logs Run:

CBL, GR, MUD

## 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
SURF	13+1/2	9+5/8	36	0	1,238	437	0	1,238	VISU
1ST	8+3/4	7	26	0	7,924	760	0	7,924	CBL
1ST LINER	6+1/8	4+1/2	11.6	6781	18,511	800	6,781	18,511	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	4,616				
SHARON SPRINGS	7,462				
NIOBRARA	7,580				

## Operator Comments

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: Katie KistnerTitle: Regulatory Analyst Date: 8/26/2014 Email: katie.kistner@anadarko.com**Attachment Check List**

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400636200	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400631255	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>					
400631241	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400631249	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400631254	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400634061	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400634065	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400667199	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)