

FORM
5Rev
09/14State 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:

400938802

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: 47120

Contact Name: REBECCA HEIM

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6361

Address: P O BOX 173779

Fax: (720) 929-7361

City: DENVER State: CO Zip: 80217-

API Number 05-123-09741-00

County: WELD

Well Name: ERIE ROAD-USX UU

Well Number: 15-1

Location: QtrQtr: NENE Section: 15 Township: 1N Range: 68W Meridian: 6

Footage at surface: Distance: 990 feet Direction: FNL Distance: 990 feet Direction: FEL

As Drilled Latitude: 40.055674 As Drilled Longitude: -104.983505

GPS Data:

Date of Measurement: 12/09/2015 PDOP Reading: 6.0 GPS Instrument Operator's Name: RH

** If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

** If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 08/13/1979 Date TD: Date Casing Set or D&A:

Rig Release Date: 08/22/1979 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 8425 TVD** Plug Back Total Depth MD 8388 TVD**

Elevations GR 5071 KB 5082 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

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	12+1/4	8+5/8	24	0	855	250	0	855	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 11/05/2015

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
PERF & PUMP	1ST	7,485	160	7,428	6,720
	1ST	5,410	700	4,300	5,450
	1ST	1,140	240	565	1,180

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	

Comment:

FORM 5 FOR REMEDIAL CEMENT JOB. "As Built" submitted via spreadsheet by Noble so date, PDOP and Operator Name are not available.

From: Schlagenhauf - DNR, Mark [mailto:mark.schlagenhauf@state.co.us]
 Sent: Monday, November 16, 2015 10:18 AM
 To: Lee, Michael
 Subject: Re: FW: log for erie road

Michael,
 Ok to proceed with safety prep as planned.

Mark Schlagenhauf P.E.
 Northeastern Engineer

On Mon, Nov 16, 2015 at 10:10 AM, Lee, Michael <Michael.Lee@anadarko.com> wrote:
 Mike Lee
 VWP Field Engineer
 Anadarko Petroleum Corporation
 (970) 302-4601

From: Windholz, Nate [Naill Services Inc.]
 Sent: Monday, November 16, 2015 10:02 AM
 To: Lee, Michael; Notary, Daniel
 Subject: log for erie road
 Regards,

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

Signed: _____ Print Name: REBECCA HEIM

Title: SR. REGULATORY ANALYST Date: _____ Email: rscdjpostdrill@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400938805	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/>	No <input checked="" 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>			
400938804	OPERATIONS SUMMARY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400938806	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400950429	WELLBORE DIAGRAM	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)