

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:
400854820

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: 96850 Contact Name: Whitney Szabo
 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 263-2730
 Address: PO BOX 370 Fax: _____
 City: PARACHUTE State: CO Zip: 81635

API Number 05-045-22194-00 County: GARFIELD
 Well Name: Puckett Well Number: GM 313-21
 Location: QtrQtr: LOT 4 Section: 28 Township: 6S Range: 96W Meridian: 6
 Footage at surface: Distance: 1279 feet Direction: FNL Distance: 1066 feet Direction: FWL
 As Drilled Latitude: 39.498963 As Drilled Longitude: -108.119380

GPS Data:
 Date of Measurement: 10/30/2014 PDOP Reading: 2.4 GPS Instrument Operator's Name: J. KIRKPATRICK

** If directional footage at Top of Prod. Zone Dist.: 1839 feet. Direction: FSL Dist.: 1171 feet. Direction: FWL
 Sec: 21 Twp: 6S Rng: 96W
 ** If directional footage at Bottom Hole Dist.: 2062 feet. Direction: FSL Dist.: 1176 feet. Direction: FWL
 Sec: 21 Twp: 6S Rng: 96W

Field Name: GRAND VALLEY Field Number: 31290
 Federal, Indian or State Lease Number: COC24099

Spud Date: (when the 1st bit hit the dirt) 01/21/2015 Date TD: 01/28/2015 Date Casing Set or D&A: 01/29/2015
 Rig Release Date: 01/30/2015 Per Rule 308A.b.

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

Total Depth MD 8167 TVD** 7030 Plug Back Total Depth MD 8084 TVD** 6947

Elevations GR 5604 KB 5625 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
 CBL/RPM/MUD No OH logs ran on this well. OH logs ran on the GM 314-21 API# 05-045-22187 and the GM 321-28 API# 05-045-22177.

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	18	48	0	42	16	0	42	VISU
SURF	13+1/2	9+5/8	32.3	0	1,350	360	0	1,350	VISU
1ST	8+3/4	4+1/2	11.6	0	8,144	1,100	3,748	8,144	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	
WASATCH G	2,542				
MESAVERDE	4,884				Mesaverde top is the williams fork top.
WILLIAMS FORK	4,884				Williams fork top is the mesaverde top.
CAMEO	7,579				
ROLLINS	8,022				

Comment:

Please note: the "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

Surface Pressure=0

LOGS UPLOADED ON 11/3/2015

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

Signed: _____

Print Name: Whitney Szabo

Title: Permit Technician II

Date: _____

Email: whitney.szabo@wpenergy.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400929403	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400929400	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			
400854830	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400854831	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400854832	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400854833	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400956715	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)