

FORM
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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



Document Number:

400578975

Date Received:

01/27/2016

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: 96155 Contact Name: Pauleen Tobin
Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 837-1661
Address: 1700 BROADWAY STE 2300 Fax: (303) 495-6780
City: DENVER State: CO Zip: 80290

API Number 05-123-38529-00 County: WELD
Well Name: Razor Well Number: 11E-1401A
Location: QtrQtr: SWNW Section: 11 Township: 10N Range: 58W Meridian: 6
Footage at surface: Distance: 2396 feet Direction: FNL Distance: 789 feet Direction: FWL
As Drilled Latitude: 40.853992 As Drilled Longitude: -103.839517

GPS Data:
Date of Measurement: 04/23/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: Michael Brown

** If directional footage at Top of Prod. Zone Dist.: 1962 feet Direction: FSL Dist.: 330 feet Direction: FWL
Sec: 11 Twp: 10N Rng: 58W

** If directional footage at Bottom Hole Dist.: 153 feet Direction: FSL Dist.: 176 feet Direction: FWL
Sec: 14 Twp: 10N Rng: 58W

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

Spud Date: (when the 1st bit hit the dirt) 01/17/2014 Date TD: 01/26/2014 Date Casing Set or D&A: 01/27/2014
Rig Release Date: 01/27/2014 Per Rule 308A.b.

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

Total Depth MD 13465 TVD** 5911 Plug Back Total Depth MD 13465 TVD** 5911
Elevations GR 5002 KB 5019 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
LWD, Mud, CBL NOTE: OH logs run on Razor 11E-0202B

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	20	16	75	0	97		0	97	VISU
SURF	13+1/2	9+5/8	36	0	1,843	797	0	1,843	VISU
1ST	8+3/4	7	29	0	6,345	420	474	6,345	CBL
1ST LINER	6	4+1/2	11.6	5080	13,460	667	5,080	13,460	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	
PIERRE	1,589		NO	NO	
HYGIENE	3,466		NO	NO	
SHARON SPRINGS	6,042		NO	NO	
NIOBRARA	6,056		NO	NO	

Operator Comments

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

Signed: _____ Print Name: Pauleen Tobin

Title: Engineer Tech Date: 1/27/2016 Email: pollyt@whiting.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400579017	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400579007	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>			
400578975	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578994	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400578999	LAS-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400579000	PDF-Measurement/Logging While Drilling	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400579004	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400579024	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400587743	PDF-CASING EVALUATION TOOL	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400978776	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Form back in process with CBL attached. Reindexed #400587743 as Casing Evaluation Tool.	1/27/2016 12:42:05 PM
Engineer	Operator has the CBL. I pushed form back to draft so she can attach it.	1/27/2016 11:48:57 AM
Engineer	Contacted operator regarding the log #400587743 called "CBL 1st Run" is actually a Casing Inspection Log. Requested CBL. Casing history good with the cement tickets.	1/21/2016 2:50:43 PM

Total: 3 comment(s)