

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



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Document Number:

401000512

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: 96155

Contact Name: Pauleen Pauleen

Name of Operator: WHITING OIL &amp; GAS CORPORATION

Phone: (303) 837-1661

Address: 1700 BROADWAY STE 2300

Fax:

City: DENVER State: CO Zip: 80290

API Number 05-123-38722-00

County: WELD

Well Name: Razor

Well Number: 12F-0102B

Location: QtrQtr: SENW Section: 12 Township: 10N Range: 58W Meridian: 6

Footage at surface: Distance: 2184 feet Direction: FNL Distance: 1369 feet Direction: FWL

As Drilled Latitude: 40.854669 As Drilled Longitude: -103.818275

## GPS Data:

Date of Measurement: 12/30/2015 PDOP Reading: 1.9 GPS Instrument Operator's Name: Larry D. Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 2476 feet. Direction: FNL Dist.: 421 feet. Direction: FWL

Sec: 12 Twp: 10N Rng: 58W

\*\* If directional footage at Bottom Hole Dist.: 616 feet. Direction: FNL Dist.: 495 feet. Direction: FWL

Sec: 1 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) 10/25/2015 Date TD: 10/31/2015 Date Casing Set or D&amp;A: 11/01/2015

Rig Release Date: 11/02/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 13736 TVD\*\* 6888 Plug Back Total Depth MD 13736 TVD\*\* 6888

Elevations GR 4940 KB 4961 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

Mud, LWD, RCBL (Note: OH logs run on Razor Federal 12F-1303A)

## 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	24	16	65	0	101	20	0	101	VISU
SURF	13+1/2	9+5/8	36	0	1,875	595	0	1,875	VISU
1ST	8+3/4	7	32	0	6,563	730	42	6,563	CBL
1ST LINER	6	4+1/2	11.6	5546	13,731	630	5,558	13,731	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	1,750		NO	NO	
HYGIENE	3,601		NO	NO	
SHARON SPRINGS	5,807		NO	NO	
NIOBRARA	5,812		NO	NO	

Comment:

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

Signed: \_\_\_\_\_

Print Name: Pauleen TobinTitle: Engineer Tech

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

Email: pollyt@whiting.com

## Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
401000531	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401000530	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>					
401000528	PDF-CBL 1ST RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401000539	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401000541	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401000542	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401000543	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

### General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)