

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:

401018127

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: Jennifer Thomas

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6808

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

API Number 05-123-39207-00

County: WELD

Well Name: RMF

Well Number: 32C-15HZ

Location: QtrQtr: NENE Section: 15 Township: 3N Range: 68W Meridian: 6

Footage at surface: Distance: 1210 feet Direction: FNL Distance: 466 feet Direction: FEL

As Drilled Latitude: 40.230135 As Drilled Longitude: -104.981370

GPS Data:

Date of Measurement: 11/30/2015 PDOP Reading: 2.0 GPS Instrument Operator's Name: Sergio Del Carmen

** If directional footage at Top of Prod. Zone Dist.: 2636 feet. Direction: FNL Dist.: 451 feet. Direction: FEL

Sec: 15 Twp: 3N Rng: 68W

** If directional footage at Bottom Hole Dist.: 2442 feet. Direction: FNL Dist.: 480 feet. Direction: FWL

Sec: 15 Twp: 3N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 11/23/2015 Date TD: 02/12/2016 Date Casing Set or D&A: 02/13/2016

Rig Release Date: 02/14/2016 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 12360 TVD** 7322 Plug Back Total Depth MD 12252 TVD** 7321

Elevations GR 4967 KB 4987 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

CBL, GR

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	16	42.1	0	60	36	0	60	VISU
SURF	13+1/2	9+5/8	36	0	1,894	756	0	1,894	VISU
1ST	7+7/8	5+1/2	17	0	12,346	1,180	152	12,346	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	
SUSSEX	4,190				
SHARON SPRINGS	7,254				
NIOBRARA	7,348				
FORT HAYS	7,933				
CODELL	8,639				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.
Per Rule 371.p Exception, open hole resistivity logs have been run on the RMF 5N-15HZ well (API 0512339204).

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

Signed: _____

Print Name: Jennifer Thomas

Title: Regulatory Specialist

Date: _____

Email: jennifer.thomas@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
401018200	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401018196	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>		
401018191	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401018192	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401018193	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401021488	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401021489	PDF-CEMENT BOND	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)