

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



DE ET OE ES

Document Number:

401046986

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 Tobin

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 05-123-41773-00

County: WELD

Well Name: Horsetail Fed

Well Number: 07F-0640

Location: QtrQtr: SENW Section: 7 Township: 10N Range: 57W Meridian: 6

Footage at surface: Distance: 2599 feet Direction: FNL Distance: 2297 feet Direction: FWL

As Drilled Latitude: 40.853601 As Drilled Longitude: -103.795734

## GPS Data:

Date of Measurement: 01/19/2016 PDOP Reading: 1.0 GPS Instrument Operator's Name: Michael Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 2423 feet. Direction: FNL Dist.: 2228 feet. Direction: FWL

Sec: 7 Twp: 10N Rng: 57W

\*\* If directional footage at Bottom Hole Dist.: 557 feet. Direction: FNL Dist.: 2281 feet. Direction: FWL

Sec: 6 Twp: 10N Rng: 57W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number: COC75059

Spud Date: (when the 1st bit hit the dirt) 02/14/2016 Date TD: 02/19/2016 Date Casing Set or D&amp;A: 02/20/2016

Rig Release Date: 02/21/2016 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 13590 TVD\*\* 5922 Plug Back Total Depth MD 13504 TVD\*\* 5922

Elevations GR 4899 KB 4920 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

## List Electric Logs Run:

Mud, LWD, RCBL (Note: Neutron log run on Horsetail 07F-1839)

## 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	0	0	101	VISU
SURF	13+1/2	9+5/8	36	0	1,978	874	0	1,978	VISU
1ST	8+1/2	5+1/2	20	0	13,552	2,359	0	13,552	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	
PIERRE	1,700		NO	NO	
HYGIENE	3,550		NO	NO	
SHARON SPRINGS	5,705		NO	NO	
NIOBRARA	5,712		NO	NO	

Comment:

Well drilled 43' passed 600' setback. Form 5A will be submitted documenting that the bottom 86' of wellbore will not produce. Tartan Sub is at 13435' (lowest interval to complete), Float Collar is at 13504'. Cement fills the hole from 13504' to TD.

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: \_\_\_\_\_

Email: pollyt@whiting.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
401047010	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401047008	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>			
401047001	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401047012	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401047015	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401047017	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401047019	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401047020	PDF-MUD	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)