

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:
400653573

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: Katie Kistner
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-4317
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217-

API Number 05-123-37000-00 County: WELD
 Well Name: MORNING FRESH STATE Well Number: 13N-15HZ
 Location: QtrQtr: NWNW Section: 15 Township: 3N Range: 66W Meridian: 6
 Footage at surface: Distance: 280 feet Direction: FNL Distance: 310 feet Direction: FWL
 As Drilled Latitude: 40.231479 As Drilled Longitude: -104.771846

GPS Data:
 Date of Measurement: 06/12/2014 PDOP Reading: 1.9 GPS Instrument Operator's Name: Carli Sloan

** If directional footage at Top of Prod. Zone Dist.: 593 feet. Direction: FNL Dist.: 115 feet. Direction: FWL
 Sec: 15 Twp: 3N Rng: 66W
 ** If directional footage at Bottom Hole Dist.: 26 feet. Direction: FSL Dist.: 242 feet. Direction: FWL
 Sec: 15 Twp: 3N Rng: 66W

Field Name: WATTENBERG Field Number: 90750
 Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 05/20/2014 Date TD: 07/11/2014 Date Casing Set or D&A: 07/13/2014
 Rig Release Date: 07/27/2016 Per Rule 308A.b.

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

Total Depth MD 12093 TVD** 7077 Plug Back Total Depth MD 12069 TVD** 7077

Elevations GR 4851 KB 4865 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:
CBL, GR, MUD

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
SURF	13+1/2	9+5/8	36	0	1,023	388	0	1,023	VISU
1ST	8+3/4	7	26	0	7,423	770	40	7,423	CBL
1ST LINER	6+1/8	4+1/2	11.6	6539	12,078				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	
SUSSEX	4,475				
SHARON SPRINGS	7,114				
NIOBRARA	7,229				

Comment:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted.

LOGGING EXCEPTION LETTER SUBMITTED TO COGCC. NO OPEN HOLE LOGS REQUIRED ON THIS PAD.

8/18/16 FORM 5 ADMENDED. RIG RELEASE DATE IS FOR THIS WELL. RIG RELEASE DATE FOR LAST WELL ON PAD WAS NOT IN PLACE WHEN THIS FORM WAS ORIGINALLY SUBMITTED.

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

Signed: _____

Print Name: Katie Kistner

Title: Regulatory Analyst

Date: _____

Email: katie.kistner@anadarko.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400662581	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400653583	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			
400653581	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400653582	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400658341	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400658344	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400658532	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)