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 ### DRILLING COMPLETION REPORT		DE	ET	OE	ES

DE	ET	OE	ES

Document Number:
401215101

Date Received:

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 & GAS CORPORATION   Phone: (303) 837-1661

Address: 1700 BROADWAY STE 2300   Fax:

City: DENVER   State: CO   Zip: 80290

API Number: 05-123-43028-00   County: WELD

Well Name: Horsetail   Well Number: 30G-3144

Location: QtrQtr: SWNE   Section: 30   Township: 10N   Range: 57W   Meridian: 6

Footage at surface: Distance: 2375 feet   Direction: FNL   Distance: 1920 feet   Direction: FEL

As Drilled Latitude: 40.810527   As Drilled Longitude: -103.791479

GPS Data:

Date of Measurement: 10/05/2016   PDOP Reading: 3.2   GPS Instrument Operator's Name: Larry D. Brown

** If directional footage at Top of Prod. Zone   Dist.: 2367 feet. Direction: FSL   Dist.: 1434 feet. Direction: FEL

Sec: 30   Twp: 10N   Rng: 57W

** If directional footage at Bottom Hole   Dist.: 120 feet. Direction: FSL   Dist.: 1691 feet. Direction: FEL

Sec: 31   Twp: 10N   Rng: 57W

Field Name: WILDCAT   Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 12/13/2016   Date TD: 12/16/2016   Date Casing Set or D&A: 12/17/2016

Rig Release Date: 01/14/2017   Per Rule 308A.b.

Well Classification:

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

Total Depth	MD	13790	TVD**	5697	Plug Back Total Depth	MD	13729	TVD**	5699

Elevations   GR 4738   KB 4759   **Digital Copies of ALL Logs must be Attached per Rule 308A** ☒

List Electric Logs Run:

Mud, LWD, CBL (NOTE: Full set of logs run Horsetail 30G-1912)

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	101	VISU
SURF	13+1/2	9+5/8	36	0	2,078	670	0	2,078	VISU
1ST	8+1/2	5+1/2	20	0	13,774	2,320	120	13,774	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	1,400		NO	NO	
HYGIENE	3,133		NO	NO	
SHARON SPRINGS	5,482		NO	NO	
NIOBRARA	5,485		NO	NO	

Comment:

Well drilled within setbacks. Form 5A will be submitted documenting that the bottom 103.4' of wellbore will not produce. Tartan sub at 13686.6' (lowest completed interval), Float Collar is at 13729.1'.
TPZ is estimated based on estimated location of lower Marker joint at 6214' and will be corrected to actual top perf on form 5a.
Estimated date for well completion is 01/01/2018.

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 ?			

Attachment Checklist

Att Doc Num	Document Name				
401215443	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
401215662	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name				
401215150	PDF-CBL 2ND RUN	Yes	☒	No	☐
401215434	LAS-MWD/LWD	Yes	☒	No	☐
401215437	PDF-MWD/LWD	Yes	☒	No	☐
401215440	PDF-MWD/LWD	Yes	☒	No	☐
401215441	PDF-MUD	Yes	☒	No	☐
401215660	DIRECTIONAL DATA	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)