

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:

401364131

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 &amp; GAS ONSHORE LP

Phone: (720) 929-6808

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

API Number 05-123-44315-00

County: WELD

Well Name: BUTTERBALL

Well Number: 24N-34HZ

Location: QtrQtr: NENE Section: 10 Township: 2N Range: 67W Meridian: 6

Footage at surface: Distance: 577 feet Direction: FNL Distance: 764 feet Direction: FEL

As Drilled Latitude: 40.158270 As Drilled Longitude: -104.869865

## GPS Data:

Date of Measurement: 04/24/2017 PDOP Reading: 1.2 GPS Instrument Operator's Name: ROB WILSON

\*\* If directional footage at Top of Prod. Zone Dist.: 48 feet. Direction: FSL Dist.: 1911 feet. Direction: FEL

Sec: 3 Twp: 2N Rng: 67W

\*\* If directional footage at Bottom Hole Dist.: 2591 feet. Direction: FSL Dist.: 1857 feet. Direction: FEL

Sec: 34 Twp: 3N Rng: 67W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/25/2017 Date TD: 06/07/2017 Date Casing Set or D&amp;A: 06/09/2017

Rig Release Date: 06/09/2017 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 15677 TVD\*\* 7306 Plug Back Total Depth MD 15664 TVD\*\* 7306

Elevations GR 4916 KB 4936 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

## List Electric Logs Run:

CBL, GR, CNL RUN ON BUTTERBALL 40C-34HZ, API 05-123-44319

## 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             | 100           | 64        | 0       | 100     | VISU   |
| SURF        | 13+1/2       | 9+5/8          | 36    | 0             | 1,852         | 719       | 0       | 1,852   | VISU   |
| 1ST         | 7+7/8        | 5+1/2          | 17    | 0             | 15,664        | 1,590     | 744     | 15,664  | 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         | 4,520          |        |                  |       |   |
| SHARON SPRINGS | 7,308          |        |                  |       |   |
| NIOBRARA       | 7,440          |        |                  |       |   |

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, compensated neutron logs have been run on the BUTTERBALL 40C-34HZ well (API 05-123-44319).

The Top of Productive Zone provided is an estimate based on the landing point at 7761' MD.

Completion is estimated for Q1, 2018

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 Analyst

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

Email: jennifer.thomas@anadarko.com

### Attachment Check List

| Att Doc Num                 | Document Name         | attached ?  |
|-----------------------------|-----------------------|---|
| <u>Attachment Checklist</u> |                       |   |
| 401364232                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|                             | Core Analysis         | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 401364230                   | 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>    |                       |   |
| 401364164                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401364166                   | PDF-MWD/LWD           | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401364189                   | LAS-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401364211                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 401364255                   | DIRECTIONAL DATA      | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

### General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|----------------|---------------------|
|                   |                | Stamp Upon Approval |

Total: 0 comment(s)