

**DRILLING COMPLETION REPORT**

Document Number:  
401412941

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: 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 05-123-42275-00 County: WELD  
 Well Name: FL GREENS FEDERAL Well Number: 35N-8HZ  
 Location: QtrQtr: NWNW Section: 8 Township: 1N Range: 66W Meridian: 6  
 Footage at surface: Distance: 1035 feet Direction: FNL Distance: 1283 feet Direction: FWL  
 As Drilled Latitude: 40.070122 As Drilled Longitude: -104.805905

GPS Data:  
 Date of Measurement: 06/05/2017 PDOP Reading: 1.4 GPS Instrument Operator's Name: PRESTON KNUTSEN

\*\* If directional footage at Top of Prod. Zone Dist.: 472 feet. Direction: FNL Dist.: 1580 feet. Direction: FWL  
 Sec: 8 Twp: 1N Rng: 66W  
 \*\* If directional footage at Bottom Hole Dist.: 29 feet. Direction: FSL Dist.: 1591 feet. Direction: FWL  
 Sec: 8 Twp: 1N Rng: 66W

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

Spud Date: (when the 1st bit hit the dirt) 06/03/2017 Date TD: 07/09/2017 Date Casing Set or D&A: 07/10/2017  
 Rig Release Date: 07/29/2017 Per Rule 308A.b.

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

Total Depth MD 12486 TVD\*\* 7276 Plug Back Total Depth MD 12386 TVD\*\* 7273  
 Elevations GR 4925 KB 4945 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
CBL, GR, CNL RUN ON FL GREENS 28C-5HZ, API 05-123-42274

**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    | 0             | 100           | 64        | 0       | 100     | VISU   |
| SURF        | 13+1/2       | 9+5/8          | 36    | 0             | 1,842         | 713       | 0       | 1,842   | VISU   |
| 1ST         | 7+7/8        | 5+1/2          | 17    | 0             | 12,477        | 1,171     | 1,115   | 12,477  | 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         | 5,099          |        |                  |       |   |
| SHARON SPRINGS | 7,345          |        |                  |       |   |
| NIOBRARA       | 7,408          |        |                  |       |   |

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 FL GREENS 28C-5HZ well (API 05-123-42274).

Completion for this well is estimated Q2, 2018.

The Top of Productive Zone provided is an estimate based on the landing point at 7707' MD.

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 ?                              |  |
|-----------------------------|-----------------------|---|--|
| <b>Attachment Checklist</b> |                       |   |  |
| 401412989                   | CMT Summary *         | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
|                             | Core Analysis         | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| 401412988                   | 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"/> |
| <b>Other Attachments</b>    |                       |   |  |
| 401412961                   | LAS-CEMENT BOND       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 401412965                   | PDF-CEMENT BOND       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 401412984                   | DIRECTIONAL DATA      | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 401413376                   | LAS-MWD/LWD           | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 401413382                   | PDF-MWD/LWD           | 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)