

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



Document Number:

401980780

Date Received:

03/21/2019

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: <u>47120</u>	Contact Name: <u>CANDICE BARBER</u>
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(970) 515-1671</u>
Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	

API Number <u>05-123-19890-00</u>	County: <u>WELD</u>
Well Name: <u>HSR-MYRNA</u>	Well Number: <u>15-12A</u>
Location: QtrQtr: <u>SWSE</u> Section: <u>12</u> Township: <u>1N</u> Range: <u>67W</u> Meridian: <u>6</u>	
Footage at surface: Distance: <u>510</u> feet Direction: <u>FSL</u> Distance: <u>2130</u> feet Direction: <u>FEL</u>	
As Drilled Latitude: _____	As Drilled Longitude: _____

GPS Data:

Date of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone Dist.: _____ feet Direction: _____ Dist.: _____ feet. Direction: _____

Sec: _____ Twp: _____ Rng: _____

** If directional footage at Bottom Hole Dist.: _____ feet Direction: _____ Dist.: _____ feet. Direction: _____

Sec: _____ Twp: _____ Rng: _____

Field Name: WATTENBERG Field Number: 90750

Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 01/19/2000 Date TD: 01/25/2000 Date Casing Set or D&A: 02/09/2000Rig Release Date: 02/09/2000 Per Rule 308A.b.

Well Classification:

☐ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation
Total Depth MD 8078 TVD** _____ Plug Back Total Depth MD 8034 TVD** _____Elevations GR 4918 KB 4930 Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

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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	12+1/4	8+5/8	24	0	871	610	0	871	CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 07/19/2019

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	3,880	175	1,800	2,205

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	
FOX HILLS	1,308				
SUSSEX	4,499				
NIOBRARA	7,137				

Operator Comments

THE REMEDIAL CEMENT WORK WAS PERFORMED IN JULY OF 2018, BUT CODED AS AN ABANDONMENT EVENT, NOT A WELL WORK EVENT SINCE THE SCOPE OF WORK CHANGED FROM A P&A TO REMEDIAL CEMENT. DUE TO THIS ERROR, IT WAS NOT PICKED UP IN OUR QUERY AND IS THEREFORE LATE.

THERE WAS A CIBP SET AT 3880', A CICR SET AT 1839' WITH 175 SXS OF CEMENT.

A FORM 17 WAS PERFORMED 11/8/2018.

THE P&A EVENT WILL COMMENCE IN AUG. OF 2019 AFTER CROPS AND A FORM 42 WILL BE SUBMITTED ACCORDINGLY.

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

Signed: _____ Print Name: CANDICE BARBER

Title: REGULATORY ANALYST Date: 3/21/2019 Email: RSCDJPOSTDRILL@ANADARKO.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
401980787	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Directional Survey **	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
401980851	Other	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
<u>Other Attachments</u>					
401980780	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
401980852	OPERATIONS SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Corrected squeeze string from Surface to First Added Fox Hills & corrected SUSX, NBRR Formation Tops per WBD (doc #401703892)	03/22/2019

Total: 1 comment(s)

