

**FORM**  
**5**Rev  
02/20**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:

402410497

Date Received:

**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/or 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: 47120

Contact Name: CRYSTAL MCCLAIN

Name of Operator: KERR MCGEE OIL &amp; GAS ONSHORE LP

Phone: (720) 9294398

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

Email: CRYSTAL\_MCCLAIN@OXY.COM

API Number 05-123-50775-00

County: WELD

Well Name: DAMORE

Well Number: 18-1HZ

Location: QtrQtr: SWNW Section: 18 Township: 5N Range: 67W Meridian: 6  
FNL/FSL FEL/FWL

Footage at surface: Distance: 2167 feet Direction: FNL Distance: 652 feet Direction: FWL

As Drilled Latitude: 40.401013 As Drilled Longitude: -104.942349

GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 02/17/2020

GPS Instrument Operator's Name: NICK KACZMARCZYK

FNL/FSL

FEL/FWL

\*\* If directional footage at Top of Prod. Zone Dist: 1975 feet Direction: FNL Dist: 18 feet Direction: FEL  
Sec: 13 Twp: 5N Rng: 68W

FNL/FSL

FEL/FWL

\*\* If directional footage at Bottom Hole Dist: 1951 feet Direction: FNL Dist: 2153 feet Direction: FEL  
Sec: 15 Twp: 5N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 02/20/2020 Date TD: 03/09/2020 Date Casing Set or D&amp;A: 03/10/2020

Rig Release Date: 04/18/2020 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 20205 TVD\*\* 6838 Plug Back Total Depth MD 20184 TVD\*\* 6838

Elevations GR 4922 KB 4948

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD/LWD. (GR/RES in API 123-50774).

**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	106	64	0	106	VISU
SURF	13+1/2	9+5/8	36	0	1,861	722	0	1,861	VISU
1ST	8+1/2	5+1/2	17	0	20,194	2,468	1,640	20,194	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	
FOX HILLS	935				
PARKMAN	3,448				
SUSSEX	3,959				
SHARON SPRINGS	6,887				
NIOBRARA	6,963				

Operator Comments:

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

Alternative Logging Program - No Open Hole Logs were run.

Per Rule 317.p Exception, Open Hole Resistivity Logs have been run on the Damore 18-2HZ well (API 123-50774).

The Top of Productive Zone provided is an estimate based on the landing point at 7279' MD.

As-drilled GPS data was taken after conductor was set.

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

Signed: \_\_\_\_\_

Print Name: CRYSTAL MCCLAINTitle: REGULATORY ANALYST

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

Email: CRYSTAL\_MCCLAIN@OXY.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
402410526	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402410528	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>			
402410521	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402410522	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402410523	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402410525	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402410530	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)

