FORM 5 Rev 02/08	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109 **DRILLING COMPLETION REPORT**	DE	ET	OE	ES

Document Number:

400223154

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

1. OGCC Operator Number: 66571

2. Name of Operator: OXY USA WTP LP

3. Address: P O BOX 27757

City: HOUSTON   State: TX   Zip: 77227

4. Contact Name: Joan Proulx

Phone: (970) 263.3641

Fax: (970) 263.3694

5. API Number 05-045-20573-00

6. County: GARFIELD

7. Well Name: Cascade Creek   Well Number: 697-16-15C

8. Location: QtrQtr: SENW   Section: 16   Township: 6S   Range: 97W   Meridian: 6

Footage at surface: Distance: 2584 feet Direction: FNL   Distance: 2475 feet Direction: FWL

As Drilled Latitude: _____   As Drilled Longitude: _____

GPS Data:

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

** If directional footage at Top of Prod. Zone   Dist.: 1339 feet. Direction: FNL   Dist.: 947 feet. Direction: FEL

Sec: 16   Twp: 6S   Rng: 97W

** If directional footage at Bottom Hole   Dist.: 1254 feet. Direction: FNL   Dist.: 822 feet. Direction: FEL

Sec: 16   Twp: 6S   Rng: 97W

9. Field Name: GRAND VALLEY   10. Field Number: 31290

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 08/01/2011 13. Date TD: 09/05/2011 14. Date Casing Set or D&A: 09/06/2011

15. Well Classification:

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

16. Total Depth MD 9255   TVD** 8882   17 Plug Back Total Depth MD 9199   TVD** 8826

18. Elevations GR 8297   KB 8327 | One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

CBL/CBL-VDL/GR-CCL
RST/Inelastic Capture Mode/GR-CCL
RST/Sigma Mode/GR-CCL
Slim Sonic Logging Tool/Sonic Porosity & Delta T/GR

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	20+0/0	16+0/0	65	0	90	4	0	90	CALC
SURF	14+3/4	9+5/8	36	0	2,688	1,201	0	2,688	CALC
1ST	8+3/4	4+1/2	11.6	0	9,235	1,782	3,514	9,235	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: 08/03/2011

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
	SURF		22	0	2,688

Details of work:

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH G	4,551	4,733	☐	☐	
FORT UNION	4,733	6,084	☐	☐	
MESAVERDE	6,084	6,260	☐	☐	
WILLIAMS FORK	6,260	8,578	☐	☐	
CAMEO	8,578	8,970	☐	☐	
ROLLINS	8,970		☐	☐	

Comment:

Subsequent Form 5.

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

Signed: _____   Print Name: Joan Proulx

Title: Regulatory Analyst   Date: _____   Email: joan_proulx@oxy.com

The subreport 'subreport3' could not be found at the specified location W:\Inetpub\Net\Reports\AttachListNew.rdlc. Please

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)