

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:

400835060

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: 96155

Contact Name: Anna Cillo

Name of Operator: WHITING OIL &amp; GAS CORPORATION

Phone: (303) 390-1328

Address: 1700 BROADWAY STE 2300

Fax:

City: DENVER

State: CO

Zip: 80290

API Number 05-123-38598-00

County: WELD

Well Name: Razor

Well Number: 11H-0215A

Location: QtrQtr: SENE Section: 11 Township: 10N Range: 58W Meridian: 6

Footage at surface: Distance: 2180 feet Direction: FNL Distance: 368 feet Direction: FEL

As Drilled Latitude: 40.854663 As Drilled Longitude: -103.824557

## GPS Data:

Date of Measurement: 01/22/2015 PDOP Reading: 1.6 GPS Instrument Operator's Name: Michael Brown

\*\* If directional footage at Top of Prod. Zone Dist.: 2395 feet. Direction: FNL Dist.: 452 feet. Direction: FEL

Sec: 11 Twp: 10N Rng: 58W

\*\* If directional footage at Bottom Hole Dist.: 1259 feet. Direction: FNL Dist.: 451 feet. Direction: FEL

Sec: 2 Twp: 10N Rng: 58W

Field Name: WILDCAT

Field Number: 99999

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 03/08/2015 Date TD: 03/20/2015 Date Casing Set or D&amp;A: 03/21/2015

Rig Release Date: 03/22/2015 Per Rule 308A.b.

## Well Classification:

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

Total Depth MD 12751 TVD\*\* 5924 Plug Back Total Depth MD 12751 TVD\*\* 5924

Elevations GR 4954 KB 4975

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

## List Electric Logs Run:

LWD, Mud, CBL (Note: Logging waiver and Neutron log)

## 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	24	16	65	0	80	0	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,842	590	0	1,842	VISU
1ST	8+3/4	7	29	0	6,297	590	2,748	6,297	CBL
1ST LINER	6+1/8	4+1/2	11.6	5198	12,747	510	5,198	12,747	CALC

## 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	
PIERRE	1,501		NO	NO	
HYGIENE	3,801		NO	NO	
SHARON SPRINGS	5,781		NO	NO	
NIOBRARA	5,788		NO	NO	

Comment:

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

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

Print Name: Anna Cillo

Title: Engineering Technician

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

Email: anna.cillo@whiting.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400835154	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400835157	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>			
400835113	PDF-NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400835115	LAS-NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400835129	PDF-CBL 3RD RUN	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400835152	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400835153	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400838057	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400838058	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400838059	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)