

FORM  
5A

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



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COMPLETED INTERVAL REPORT

Document Number:

2555882

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 53650 4. Contact Name: ANNA WALLS  
 2. Name of Operator: MARATHON OIL COMPANY Phone: (713) 296-3468  
 3. Address: 5555 SAN FELIPE Fax: (713) 513-4394  
 City: HOUSTON State: TX Zip: 77056

5. API Number 05-045-16847-00 6. County: GARFIELD  
 7. Well Name: 696-6A Well Number: 13  
 8. Location: QtrQtr: SESE Section: 34 Township: 5S Range: 96W Meridian: 6  
 9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

Completed Interval

FORMATION: ROLLINS Status: ABANDONED COMPLETION  
 Treatment Date: 11/25/2009 Date of First Production this formation: \_\_\_\_\_  
 Perforations Top: 10246 Bottom: 10271 No. Holes: 49 Hole size: 41/100  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:   
 PERF'D 10246-10260' & 10264-10271'. FRAC'D W/171,000# 30/50 TLC SAND & 6709 BBLs. INJECTION TEST, DECISION TO ABANDON, CIBP SET @ 10330' W/10' CMT ON TOP. CIBP SET @ 10230' W/10' CMT ON TOP.  
 This formation is commingled with another formation:  Yes  No  
**Test Information:**  
 Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_  
 Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_ GOR: \_\_\_\_\_  
 Test Method: \_\_\_\_\_ Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
 Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_  
 Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ Packer Depth: \_\_\_\_\_  
 Reason for Non-Production:  
INJECTION TEST FAILED.  
 Date formation Abandoned: 02/03/2010 Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_  
 Bridge Plug Depth: 10230 Sacks cement on top: 2

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 05/17/2010 Date of First Production this formation: 05/24/2010

Perforations Top: 8472 Bottom: 10130 No. Holes: 186 Hole size: 41/100

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

8 STAGES: FRAC W/717,039# 30/50 OTTAWA SD & 22,206 BBLs SLICKWATER. SEE ATTACHED.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 06/05/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 1889 Bbls H2O: 218

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_ GOR: \_\_\_\_\_

Test Method: FLOWING Casing PSI: 1680 Tubing PSI: 1025 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1006 API Gravity Oil: \_\_\_\_\_

Tubing Size: 2 + 3/8 Tubing Setting Depth: 10090 Tbg setting date: 05/22/2010 Packer Depth: \_\_\_\_\_

Reason for Non-Production: \_\_\_\_\_  
\_\_\_\_\_

Date formation Abandoned: \_\_\_\_\_ Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: \_\_\_\_\_ Sacks cement on top: \_\_\_\_\_

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 WALLS

Title: REGULATORY Date: 6/11/2010 Email AVWALLS@MARATHONOIL.COM

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Nashin Director of COGCC Date: 11/3/2010

**Attachment Check List**

Att Doc Num	Name	Doc Description
2555882	FORM 5A SUBMITTED	LF@2509560 2555882
2555883	WELLBORE DIAGRAM	LF@2509561 2555883

Total Attach: 2 Files