

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:

400085610

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: 28600 4. Contact Name: Beatrice Sabala  
 2. Name of Operator: EXXON MOBIL CORPORATION Phone: (281) 654-2685  
 3. Address: P O BOX 4358 Fax: (281) 654-1940  
 City: HOUSTON State: TX Zip: 77210-43

5. API Number 05-103-11099-00 6. County: RIO BLANCO  
 7. Well Name: FREEDOM UNIT Well Number: 197-33A1  
 8. Location: QtrQtr: SWSE Section: 33 Township: 1S Range: 97W Meridian: 6  
 9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

Completed Interval

FORMATION: COZZETTE Status: PRODUCING  
 Treatment Date: 06/27/2010 Date of First Production this formation: 07/07/2010  
 Perforations Top: 11250 Bottom: 11368 No. Holes: 36 Hole size: 0.28  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:   
 \_\_\_\_\_  
 Frac w/ 34,700# 40/70, 12,100# 40/70 RCS, 8,600# 100 mesh proppant.  
 This formation is commingled with another formation:  Yes  No  
**Test Information:**  
 Date: 07/07/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 70 Bbls H2O: 43  
 Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 70 Bbls H2O: 43 GOR: 0  
 Test Method: Flowing Casing PSI: 1371 Tubing PSI: \_\_\_\_\_ Choke Size: 18/64  
 Gas Disposition: SOLD Gas Type: WET BTU Gas: 1070 API Gravity Oil: \_\_\_\_\_  
 Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ 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: \_\_\_\_\_

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 06/27/2010 Date of First Production this formation: 07/06/2010

Perforations Top: 11528 Bottom: 11977 No. Holes: 108 Hole size: 0.28

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

Frac w/ 162,100# 40/70, 56,900# 40/70 RCS, 40,900# 100 mesh proppant. Set frac plug at 11,590.  
Drilled out all plugs.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 07/07/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 182 Bbls H2O: 111 GOR: 0

Test Method: Flowing Casing PSI: 1371 Tubing PSI: \_\_\_\_\_ Choke Size: 18/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1070 API Gravity Oil: \_\_\_\_\_

Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ 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: \_\_\_\_\_

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 07/03/2010 Date of First Production this formation: 07/06/2010

Perforations Top: 9089 Bottom: 10852 No. Holes: 336 Hole size: 0.28

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

Frac w/408,400# 40/70, 173,600# 40/70 RCS, 113,700# 100 mesh proppant. Set frac plugs at 9,370, 10,310, 10,842.  
All plugs drilled out.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 07/07/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 900 Bbls H2O: 550

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 900 Bbls H2O: 550 GOR: 0

Test Method: Flowing Casing PSI: 1371 Tubing PSI: \_\_\_\_\_ Choke Size: 18/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1070 API Gravity Oil: \_\_\_\_\_

Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ 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: Beatrice Sabala

Title: Technical Asst. Date: 8/18/2010 Email beatrice.sabala@exxonmobil.com  
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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. Neslin* Director of COGCC Date: 11/3/2010

**Attachment Check List**

Att Doc Num	Name	Doc Description
400085610	FORM 5A SUBMITTED	LF@2525549 400085610
400085680	WELLBORE DIAGRAM	LF@2525550 400085680

Total Attach: 2 Files