

**FORM
5A**Rev
02/08State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

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COMPLETED INTERVAL REPORT

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: 66561 4. Contact Name: Joan Proulx
2. Name of Operator: OXY USA INC Phone: (970) 263.3641
3. Address: PO BOX 27757 Fax: (970) 263.3694
City: HOUSTON State: TX Zip: 77227

5. API Number 05-077-09646-00 6. County: MESA
7. Well Name: MCDANIEL Well Number: 11-10B
8. Location: QtrQtr: NWSE Section: 11 Township: 9S Range: 94W Meridian: 6
9. Field Name: BRUSH CREEK Field Code: 7562

Completed Interval

FORMATION: <u>COZZETTE</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>05/10/2010</u>		Date of First Production this formation: <u>06/16/2010</u>	
Perforations	Top: <u>7910</u>	Bottom: <u>7975</u>	No. Holes: <u>18</u> Hole size: <u>035/100</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
<u>1 stage of slickwater frac with 2,502 bbls of frac fluid and 81,745 bbls of 20/40 white sand proppant</u>			
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Test Information:			
Date: <u>06/21/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>272</u> Bbls H2O: <u>47</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>272</u> Bbls H2O: <u>47</u> GOR: <u>0</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>1600</u>	Tubing PSI: <u>1000</u>	Choke Size: <u>024/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1055</u>	API Gravity Oil: <u>0</u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>7473</u>	Tbg setting date: <u>06/13/2010</u>	Packer Depth: <u></u>
Reason for Non-Production: <u></u>			
Date formation Abandoned: <u></u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt <u></u>			
Bridge Plug Depth: <u></u> Sacks cement on top: <u></u>			

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 05/08/2010 Date of First Production this formation: 06/16/2010

Perforations Top: 8078 Bottom: 8175 No. Holes: 27 Hole size: 035/100

Provide a brief summary of the formation treatment: Open Hole: ☐

1 stage slickwater frac with 3,191 bbls of frac fluid and 94,093 lbs of 20/40 white sand proppant

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 06/21/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 272 Bbls H2O: 47

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 272 Bbls H2O: 47 GOR: 0

Test Method: Flowing Casing PSI: 1600 Tubing PSI: 1000 Choke Size: 024/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1055 API Gravity Oil: _____

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7473 Tbg setting date: 06/13/2010 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: _____

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 05/13/2010 Date of First Production this formation: 06/16/2010

Perforations Top: 6068 Bottom: 7337 No. Holes: 108 Hole size: 035/100

Provide a brief summary of the formation treatment: Open Hole: ☐

5 stages of slickwater frac with 14,699 bbls of frac fluid and 569,733 lbs of 30/50 white sand proppant

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 06/21/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 818 Bbls H2O: 143

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 818 Bbls H2O: 143 GOR: 0

Test Method: Flowing Casing PSI: 1600 Tubing PSI: 1000 Choke Size: 024/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1055 API Gravity Oil: _____

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7473 Tbg setting date: 06/13/2010 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:

This Form 5A is being submitted to add the BTU data; the original Form 5A was submitted 7/9/2010.

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

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: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)