

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



| | | | |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

Document Number:

400091559

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: 47120 4. Contact Name: Cindy Vue
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6832
3. Address: P O BOX 173779 Fax: (720) 929-7832
City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-21423-00 6. County: WELD
7. Well Name: POWERS Well Number: 11-23A
8. Location: QtrQtr: NESW Section: 23 Township: 2N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

| | |
|--|---|
| FORMATION: <u>J SAND</u> | Status: <u>TEMPORARILY ABANDONED</u> |
| Treatment Date: <u>07/26/2010</u> | Date of First Production this formation: <u>05/27/2003</u> |
| Perforations Top: <u>7629</u> Bottom: <u>7668</u> | No. Holes: <u>90</u> Hole size: <u>38/100</u> |
| Provide a brief summary of the formation treatment: | Open Hole: <input type="checkbox"/> |
| <u>Set CIBP @ 7310' w/ sand cap for mechanical integrity.</u> | |
| This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: | |
| <u>JSND temporarily abandoned for NB-CD recomple.</u> | |
| Date formation Abandoned: <u>07/26/2010</u> | Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____ |
| Bridge Plug Depth: <u>7310</u> | Sacks cement on top: _____ |

