

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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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: 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 05-123-09460-00 6. County: WELD  
7. Well Name: UPRR 42 PAN AM GAS UNIT "A" Well Number: 1  
8. Location: QtrQtr: NENE Section: 33 Township: 2N Range: 66W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

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|--|---|
| FORMATION: <u>J SAND</u>   | Status: <u>TEMPORARILY ABANDONED</u>  |
| Treatment Date: <u>07/06/2010</u>  | Date of First Production this formation: <u>10/05/1978</u>  |
| Perforations Top: <u>7904</u> Bottom: <u>7950</u>  | No. Holes: <u>152</u> Hole size: <u>38/100</u>  |
| Provide a brief summary of the formation treatment:  | Open Hole: <input type="checkbox"/>   |
| <u>Set sand plug @ 7820'.</u>  |   |
| This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |
| <b>Test Information:</b>   |   |
| 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>07/06/2010</u>  | Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____ |
| Bridge Plug Depth: <u>7820</u>   | Sacks cement on top: _____  |

