

**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 05-077-09176-00 6. County: MESA  
7. Well Name: CURREY Well Number: 16-9  
8. Location: QtrQtr: NWSE Section: 16 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>01/11/2010</u>		Date of First Production this formation: <u>01/17/2010</u>	
Perforations	Top: <u>7075</u> Bottom: <u>7144</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"/>	
<div>1 stage of slickwater frac with 2,860 bbls of 2% KCl and 113,079 lbs of 20/40 white sand This stage was a combined stage with the Corcoran formation.</div>			
This formation is commingled with another formation:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Test Information:</b>			
Date: <u>01/19/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>208</u> Bbls H2O: <u>74</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>208</u> Bbls H2O: <u>74</u> GOR: <u>0</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>650</u>	Tubing PSI: <u></u>	Choke Size: <u>024/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1070</u>	API Gravity Oil: <u></u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6632</u>	Tbg setting date: <u>12/02/2010</u>	Packer Depth: <u></u>
Reason for Non-Production: <div></div>			
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: <u>CORCORAN</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>01/11/2010</u>		Date of First Production this formation: <u>01/17/2010</u>	
Perforations	Top: <u>7245</u> Bottom: <u>7309</u>	No. Holes: <u>12</u>	Hole size: <u>035/100</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
1 stage of slickwater frac with 1,908 bbls of 2% KCl and 75,387 lbs of 20/40 white sand This stage was a combined stage with the Cozzette formation.			
This formation is commingled with another formation:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Test Information:</b>			
Date: <u>01/19/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>207</u> Bbls H2O: <u>74</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>207</u> Bbls H2O: <u>74</u> GOR: <u>0</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>650</u>	Tubing PSI: <u>        </u>	Choke Size: <u>024/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1070</u>	API Gravity Oil: <u>        </u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6632</u>	Tbg setting date: <u>12/02/2010</u>	Packer Depth: <u>        </u>
Reason for Non-Production:			
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: <u>WILLIAMS FORK - CAMEO</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>01/13/2010</u>		Date of First Production this formation: <u>01/17/2010</u>	
Perforations	Top: <u>5306</u> Bottom: <u>6541</u>	No. Holes: <u>90</u>	Hole size: <u>035/100</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
5 stages of slickwater frac with 15,940 bbls of 2% KCl and 606,136 lbs of 20/40 white sand			
This formation is commingled with another formation:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Test Information:</b>			
Date: <u>01/19/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>623</u> Bbls H2O: <u>222</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>623</u> Bbls H2O: <u>222</u> GOR: <u>0</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>650</u>	Tubing PSI: <u>        </u>	Choke Size: <u>024/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1070</u>	API Gravity Oil: <u>        </u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6632</u>	Tbg setting date: <u>12/02/2010</u>	Packer Depth: <u>        </u>
Reason for Non-Production:			
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>	

Comment:

This subsequent Form 5A is being submitted to reflect the new EOT. Repair work was completed on this well from 11/29/2010 to 12/2/2010 due to bad threads on jt 122 and a hole at jt 143.

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  
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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: \_\_\_\_\_

**Director of COGCC**

Date: \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name

Total Attach: 0 Files

### **General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>

Total: 0 comment(s)