

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:

400110743

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

5. API Number 05-123-25541-00
6. County: WELD
7. Well Name: WATERFRONT
Well Number: 11-34
8. Location: QtrQtr: SESW Section: 34 Township: 3N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J SAND Status: PRODUCING
Treatment Date: 11/08/2010 Date of First Production this formation: 11/15/2010
Perforations Top: 7938 Bottom: 7960 No. Holes: 66 Hole size: 0.38
Provide a brief summary of the formation treatment: Open Hole:
Frac JSND w/ 163,086 gal SW & 115,120# 40/70 sand & 4,000# SB Excel.
This formation is commingled with another formation: Yes No
Test Information:
Date: 11/19/2010 Hours: 24 Bbls oil: 7 Mcf Gas: 95 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 7 Mcf Gas: 95 Bbls H2O: 0 GOR: 13571
Test Method: FLOWING Casing PSI: 1325 Tubing PSI: 896 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1315 API Gravity Oil: 53
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7905 Tbg setting date: 11/10/2010 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: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 11/15/2010 Date of First Production this formation: 12/16/2008

Perforations Top: 7228 Bottom: 7512 No. Holes: 126 Hole size: 0.38

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

NBRR Perf 7228-7370 Holes 66 Size 0.42 CODL Perf 7492-7512 Holes 60 Size 0.38
No additional treatment.

This formation is commingled with another formation: Yes No

Test Information:

Date: 11/19/2010 Hours: 24 Bbls oil: 7 Mcf Gas: 95 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: 7 Mcf Gas: 95 Bbls H2O: 0 GOR: 13571

Test Method: FLOWING Casing PSI: 1325 Tubing PSI: 896 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1315 API Gravity Oil: 53

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7905 Tbg setting date: 11/10/2010 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: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Cindy Vue

Title: Regulatory Analyst II Date: 11/22/2010 Email Cindy.Vue@anadarko.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: David S. Neslin Director of COGCC Date: 1/18/2011

Attachment Check List

Att Doc Num	Name
400110743	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)