

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:

2555566

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: 100264 4. Contact Name: WANETT MCCAULEY
 2. Name of Operator: XTO ENERGY INC Phone: _____
 3. Address: 382 CR 3100 Fax: _____
 City: AZTEC State: NM Zip: 87410

5. API Number 05-067-08723-00 6. County: LA PLATA
 7. Well Name: UTE A Well Number: 1R GOV'T
 8. Location: QtrQtr: SESE Section: 35 Township: 33N Range: 7W Meridian: N
 9. Field Name: IGNACIO BLANCO Field Code: 38300

Completed Interval

FORMATION: MESAVERDE Status: TEMPORARILY ABANDONED
 Treatment Date: 09/22/2010 Date of First Production this formation: 11/07/2002
 Perforations Top: 4841 Bottom: 5174 No. Holes: 78 Hole size: 29/100
 Provide a brief summary of the formation treatment: _____ Open Hole:
 This formation is commingled with another formation: Yes 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:
UNECONOMIC
 Date formation Abandoned: 06/04/2010 Squeeze: Yes No If yes, number of sacks cmt _____
 Bridge Plug Depth: 4810 Sacks cement on top: 0

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
 Signed: _____ Print Name: WANETT MCCAULEY
 Title: REG COMP TECH Date: 6/10/2010 Email WANETT_MCCAULEY@XTOENERGY.COM

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved *David S. Nashin*

COGCC Approved: _____ Director of COGCC Date: 2/18/2011

Attachment Check List

Att Doc Num	Name
2555566	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	PROD IS REPORTED AS MESAVERDE	2/18/2011 11:15:09 AM

Total: 1 comment(s)