

FORMATION: NIORARA-CODELL-SUSSEX Status: COMMINGLED

Treatment Date: 02/24/2011 Date of First Production this formation: 03/08/2011

Perforations Top: 4892 Bottom: 7848 No. Holes: 170 Hole size: 0.42

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

NB-CD-SUSX COMMINGLED.

This formation is commingled with another formation: Yes No

Test Information:

Date: 03/28/2011 Hours: 24 Bbls oil: 70 Mcf Gas: 2 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 70 Mcf Gas: 2 Bbls H2O: 0 GOR: 29

Test Method: FLOWING Casing PSI: 81 Tubing PSI: _____ Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1224 API Gravity Oil: 46

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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: SUSSEX Status: PRODUCING

Treatment Date: 02/24/2011 Date of First Production this formation: 03/08/2011

Perforations Top: 4892 Bottom: 4986 No. Holes: 52 Hole size: 0.42

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

Frac Sussex down 4-1/2" Csg w/ 20,336 gal Lightning N2 w/ 180,980# 16/30, 20,680# SB Excel.

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: _____

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: CARA MAHLER

Title: REGULATORY ANALYST 1

Date: _____

Email: CARA.MAHLER@ANADARKO.COM

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)