

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

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.

Document Number:

400167286

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-  
4. Contact Name: CARA MAHLER  
Phone: (720) 929-6029  
Fax: (720) 929-7029

5. API Number 05-123-28127-00  
6. County: WELD  
7. Well Name: SHABLE Well Number: 25-20  
8. Location: QtrQtr: SENE Section: 20 Township: 4N Range: 65W Meridian: 6  
9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

## Completed Interval

FORMATION: J-NIOBRARA-CODELL

Status: COMMINGLED

Treatment Date: 04/27/2011

Date of First Production this formation: 05/10/2011

Perforations Top: 7168 Bottom: 7974 No. Holes: 232 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

JSND RECOMPLETE

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: 05/18/2011 Hours: 24 Bbls oil: 1 Mcf Gas: 231 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 1 Mcf Gas: 231 Bbls H2O: 0 GOR: 23100

Test Method: FLOWING Casing PSI: 40 Tubing PSI: Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1207 API Gravity Oil: 63

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: J SAND

Status: PRODUCING

Treatment Date: 04/27/2011

Date of First Production this formation: 05/19/2011

Perforations Top: 7946 Bottom: 7974 No. Holes: 52 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac J-Sand down 4-1/2" Csg w/ 162,876 gal Slickwater w/ 115,000# 40/70, 4,000# 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

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**

User Group	Comment	Comment Date

Total: 0 comment(s)