


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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center;">400134723</div>	DE	ET	OE	ES
DE	ET	OE	ES				
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: <u>47120</u>		4. Contact Name: <u>CARA MAHLER</u>					
2. Name of Operator: <u>KERR-MCGEE OIL & GAS ONSHORE LP</u>		Phone: <u>(720) 929-6029</u>					
3. Address: <u>P O BOX 173779</u>		Fax: <u>(720) 929-7029</u>					
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-37</u>							
5. API Number <u>05-123-20690-00</u>		6. County: <u>WELD</u>					
7. Well Name: <u>PEPPLER</u>		Well Number: <u>3-30A</u>					
8. Location: QtrQtr: <u>NENW</u> Section: <u>30</u> Township: <u>3N</u> Range: <u>67W</u> Meridian: <u>6</u>							
9. Field Name: <u>WATTENBERG</u>		Field Code: <u>90750</u>					
<u>Completed Interval</u>							
FORMATION: <u>J SAND</u>		Status: <u>TEMPORARILY ABANDONED</u>					
Treatment Date: <u>12/21/2010</u>		Date of First Production this formation: <u>03/21/2002</u>					
Perforations Top: <u>7647</u> Bottom: <u>7675</u>		No. Holes: <u>84</u> Hole size: <u>0.42</u>					
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
Spot 2250# sand plug, top of plug @ 7442'.							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:							
Set Sand Plug @ 7442' for NB/CD REFRAC							
Date formation Abandoned: <u>12/21/2010</u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____					
Bridge Plug Depth: _____		Sacks cement on top: _____					

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: <u>NIOBARRA-CODELL</u>		Status: <u>PRODUCING</u>			
Treatment Date: <u>01/11/2011</u>		Date of First Production this formation: <u>01/19/2011</u>			
Perforations	Top: <u>6990</u>	Bottom: <u>7273</u>	No. Holes: <u>108</u>	Hole size: <u>0.42</u>	
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>			
<div style="border: 1px solid black; padding: 5px;">NB PERF 6990-7106 HOLES 66 SIZE .42 CD PERF 7258-7273 HOLES 42 SIZE .40 Re-Frac Niobrara A & B & C down 4-1/2" Csg w/ 252 gal 15% HCl & 241,836gal Slickwater w/ 201,060# 40/70, 4,440# SB Excel. Re-Frac Codell down 4-1/2" Csg w/ 128,100 gal Vistar w/ 261,120# 20/40, 4,100# SB Excel.</div>					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Test Information:					
Date: <u>02/16/2011</u>	Hours: <u>24</u>	Bbls oil: <u>4</u>	Mcf Gas: <u>41</u>	Bbls H2O: <u>0</u>	
Calculated 24 hour rate:		Bbls oil: <u>4</u>	Mcf Gas: <u>41</u>	Bbls H2O: <u>0</u>	GOR: <u>10250</u>
Test Method: <u>FLOWING</u>		Casing PSI: <u>420</u>	Tubing PSI: _____	Choke Size: _____	
Gas Disposition: <u>SOLD</u>		Gas Type: <u>WET</u>	BTU Gas: <u>1276</u>	API Gravity Oil: <u>48</u>	
Tubing Size: _____		Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____	
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____		
Bridge Plug Depth: _____		Sacks cement on top: _____			

Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.			
Signed: _____		Print Name: <u>CARA MAHLER</u>	
Title: <u>REGULATORY ANALYST 1</u>	Date: <u>2/17/2011</u>	Email <u>CARA.MAHLER@ANADARKO.COM</u>	

Attachment Check List

Att Doc Num	Name
400134723	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)