

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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Document Number:

400142151

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: 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: Kenny Trueax
Phone: (720) 929-6383
Fax: (720) 929-7383

5. API Number 05-123-24671-00
6. County: WELD
7. Well Name: HOPPER
Well Number: 20-15
8. Location: QtrQtr: NWSE Section: 15 Township: 2N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED
Treatment Date: 01/20/2011 Date of First Production this formation: 02/14/2011
Perforations Top: 7189 Bottom: 7481 No. Holes: 198 Hole size: 0.38
Provide a brief summary of the formation treatment: Open Hole: ☐
NB Perf 7189-7346 Holes: 66 Size: 42
CD Perf 7481-7461 Holes: 60 Size: 42
J SAND Perf 7900-7924 Holes: 72 Size: .38
No choke

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 03/06/2011 Hours: 24 Bbls oil: 8 Mcf Gas: 170 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 8 Mcf Gas: 170 Bbls H2O: 0 GOR: 21250
Test Method: Flowing Casing PSI: 858 Tubing PSI: 286 Choke Size:
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1273 API Gravity Oil: 51
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7858 Tbg setting date: 02/10/2011 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: 01/20/2011 Date of First Production this formation: 02/14/2011

Perforations Top: 7900 Bottom: 7924 No. Holes: 72 Hole size: 0.38

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

J Sand perms: 7900-7924 Holes: 72 Size: .38
Frac J Sand w/ 164,119 gal SW w/ 115,140# 40/70 sand, 4,000# SB Excel sand

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: Kenny Trueax

Title: Regulatory Analyst II Date: 3/14/2011 Email Kenny.Trueax@anadarko.com

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Attachment Check List

Att Doc Num	Name
400142151	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)