

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 with columns DE, ET, OE, ES

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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.

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: CARA MAHLER Phone: (720) 929-6029 Fax: (720) 929-7029

5. API Number 05-123-20994-00 6. County: WELD 7. Well Name: RULE Well Number: 6-35A 8. Location: QtrQtr: SENW Section: 35 Township: 1N Range: 67W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED Treatment Date: 04/21/2011 Date of First Production this formation: 04/27/2011 Perforations Top: 7282 Bottom: 8170 No. Holes: 168 Hole size: 0.38 Provide a brief summary of the formation treatment: Open Hole: [ ] This formation is commingled with another formation: [ ] Yes [X] No Test Information: Date: 05/07/2011 Hours: 24 Bbls oil: 28 Mcf Gas: 74 Bbls H2O: 0 Calculated 24 hour rate: Bbls oil: 28 Mcf Gas: 74 Bbls H2O: 0 GOR: 2643 Test Method: FLOWING Casing PSI: 900 Tubing PSI: 527 Choke Size: 26/64 Gas Disposition: SOLD Gas Type: WET BTU Gas: 1270 API Gravity Oil: 47 Tubing Size: 2 + 3/8 Tubing Setting Depth: 8018 Tbg setting date: 04/19/2011 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:

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

FORMATION: J SAND Status: PRODUCING

Treatment Date: 04/21/2011 Date of First Production this formation: 12/27/2002

Perforations Top: 8152 Bottom: 8170 No. Holes: 44 Hole size: 0.34

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

SAND PLUG REMOVED @ 7899'

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: 5/10/2011 Email CARA.MAHLER@ANADARKO.COM

**Attachment Check List**

Att Doc Num	Name
400163525	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)