

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 4 columns: DE, ET, OE, ES

Document Number: 400168453

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 4. Contact Name: CARA MAHLER
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6029
3. Address: P O BOX 173779 City: DENVER State: CO Zip: 80217-37 Fax: (720) 929-7029

5. API Number 05-123-21094-00 6. County: WELD
7. Well Name: SMITH Well Number: 10-34
8. Location: QtrQtr: NWSE Section: 34 Township: 3N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED
Treatment Date: 05/06/2011 Date of First Production this formation: 05/13/2011
Perforations Top: 7104 Bottom: 7832 No. Holes: 464 Hole size: 0.42
Provide a brief summary of the formation treatment: Open Hole: []
REMOVED SAND PLUG SET @ 7691' ON 10/1/2009 TO COMMINGLE THE JSND WITH THE NB/CD.
This formation is commingled with another formation: [] Yes [X] No
Test Information:
Date: 05/22/2011 Hours: 24 Bbls oil: 19 Mcf Gas: 224 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 19 Mcf Gas: 224 Bbls H2O: 0 GOR: 11789
Test Method: FLOWING Casing PSI: 426 Tubing PSI: Choke Size: 10/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1250 API Gravity Oil: 52
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:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: J SAND Status: PRODUCING

Treatment Date: 05/06/2011 Date of First Production this formation: 03/13/2003

Perforations Top: 7796 Bottom: 7832 No. Holes: 60 Hole size: 0.42

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

REMOVED SAND PLUG SET @ 7691' ON 10/1/2009 TO COMMINGLE WITH NB/CD.

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:

JSND SHOULD HAVE HAD STATUS OF TEMPORARILY ABANDONED. A SAND PLUG WAS SET ON 10/1/2009 @ 7619'.

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: 5/24/2011 Email CARA.MAHLER@ANADARKO.COM

Attachment Check List

Att Doc Num	Name
400168453	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)