


|   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
|---|--|---|--|---------------------------------------|-------------------------------------|---|--|--|--|--|---------------------|---|-------------------------------------|---|------------------------|---------------------|--------------------------|--|------------------------------|----------------------|----------------------|----------------------------|--|----------------------|-------------------------------|---------------------------|-----------------------|--|
| <b>FORM 5A</b><br>Rev 02/08   | <b>State of Colorado</b><br><b>Oil and Gas Conservation Commission</b><br>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> | DE                                    | ET                                  | OE  | ES   |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| DE  | ET   | OE  | ES   |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| <b>COMPLETED INTERVAL REPORT</b>  |  |   | Document Number:<br><br><div style="border: 1px solid black; padding: 5px; text-align: center;">400166404</div>  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| 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.   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| <table style="width: 100%;"> <tr> <td style="width: 50%;">1. OGCC Operator Number: <u>47120</u></td> <td style="width: 50%;">4. Contact Name: <u>CARA MAHLER</u></td> </tr> <tr> <td>2. Name of Operator: <u>KERR-MCGEE OIL &amp; GAS ONSHORE LP</u></td> <td>Phone: <u>(720) 929-6029</u></td> </tr> <tr> <td>3. Address: <u>P O BOX 173779</u></td> <td>Fax: <u>(720) 929-7029</u></td> </tr> <tr> <td>City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-37</u></td> <td></td> </tr> </table>  |  |   |  | 1. OGCC Operator Number: <u>47120</u> | 4. Contact Name: <u>CARA MAHLER</u> | 2. Name of Operator: <u>KERR-MCGEE OIL &amp; 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>  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| 1. OGCC Operator Number: <u>47120</u>   | 4. Contact Name: <u>CARA MAHLER</u>  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
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| 3. Address: <u>P O BOX 173779</u>   | Fax: <u>(720) 929-7029</u>   |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
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| <u>Completed Interval</u>   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| <table style="width: 100%;"> <tr> <td style="width: 50%;">FORMATION: <u>NIOBRARA-CODELL</u></td> <td style="width: 50%;">Status: <u>PRODUCING</u></td> </tr> <tr> <td>Treatment Date: <u>04/26/2011</u></td> <td>Date of First Production this formation: <u>05/04/2011</u></td> </tr> <tr> <td>Perforations Top: <u>6954</u> Bottom: <u>7238</u></td> <td>No. Holes: <u>132</u> Hole size: <u>0.38</u></td> </tr> <tr> <td colspan="2">Provide a brief summary of the formation treatment: <span style="float: right;">Open Hole: <input type="checkbox"/></span></td> </tr> <tr> <td colspan="2" style="border: 1px solid black; padding: 5px;">           NB PERF 6954-7102 HOLES 72 SIZE .42 CD PERF 7218-7238 HOLES 60 SIZE .38<br/>           Frac Niobrara A &amp; B &amp; C down 4-1/2" Csg w/ 252 gal 15% HCl &amp; 241,248 gal Slickwater w/ 200,560# 40/70, 4,440# SB Excel, 0# .<br/>           Frac Codell down 4-1/2" Csg w/ 202,608 gal Slickwater w/ 150,020# 40/70, 4,160# SB Excel, 0# .         </td> </tr> <tr> <td colspan="2">This formation is commingled with another formation: <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></td> </tr> </table> |  |   |  | FORMATION: <u>NIOBRARA-CODELL</u>     | Status: <u>PRODUCING</u>            | Treatment Date: <u>04/26/2011</u>                               | Date of First Production this formation: <u>05/04/2011</u> | Perforations Top: <u>6954</u> Bottom: <u>7238</u>  | No. Holes: <u>132</u> Hole size: <u>0.38</u> | Provide a brief summary of the formation treatment: <span style="float: right;">Open Hole: <input type="checkbox"/></span> |                     | NB PERF 6954-7102 HOLES 72 SIZE .42 CD PERF 7218-7238 HOLES 60 SIZE .38<br>Frac Niobrara A & B & C down 4-1/2" Csg w/ 252 gal 15% HCl & 241,248 gal Slickwater w/ 200,560# 40/70, 4,440# SB Excel, 0# .<br>Frac Codell down 4-1/2" Csg w/ 202,608 gal Slickwater w/ 150,020# 40/70, 4,160# SB Excel, 0# . |                                     | This formation is commingled with another formation: <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
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| This formation is commingled with another formation: <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| <b>Test Information:</b><br><table style="width: 100%;"> <tr> <td>Date: <u>05/16/2011</u></td> <td>Hours: <u>24</u></td> <td>Bbls oil: <u>82</u></td> <td>Mcf Gas: <u>161</u></td> <td>Bbls H2O: <u>0</u></td> </tr> <tr> <td colspan="2">Calculated 24 hour rate:</td> <td>Bbls oil: <u>82</u></td> <td>Mcf Gas: <u>161</u></td> <td>Bbls H2O: <u>0</u> GOR: <u>1963</u></td> </tr> <tr> <td>Test Method: <u>FLOWING</u></td> <td>Casing PSI: <u>899</u></td> <td>Tubing PSI: <u></u></td> <td colspan="2">Choke Size: <u>10/64</u></td> </tr> <tr> <td>Gas Disposition: <u>SOLD</u></td> <td>Gas Type: <u>WET</u></td> <td>BTU Gas: <u>1219</u></td> <td colspan="2">API Gravity Oil: <u>49</u></td> </tr> <tr> <td>Tubing Size: <u></u></td> <td>Tubing Setting Depth: <u></u></td> <td>Tbg setting date: <u></u></td> <td colspan="2">Packer Depth: <u></u></td> </tr> </table>   |  |   |  | Date: <u>05/16/2011</u>               | Hours: <u>24</u>                    | Bbls oil: <u>82</u>   | Mcf Gas: <u>161</u>  | Bbls H2O: <u>0</u>   | Calculated 24 hour rate:                     |  | Bbls oil: <u>82</u> | Mcf Gas: <u>161</u>   | Bbls H2O: <u>0</u> GOR: <u>1963</u> | Test Method: <u>FLOWING</u>   | Casing PSI: <u>899</u> | Tubing PSI: <u></u> | Choke Size: <u>10/64</u> |  | Gas Disposition: <u>SOLD</u> | Gas Type: <u>WET</u> | BTU Gas: <u>1219</u> | API Gravity Oil: <u>49</u> |  | Tubing Size: <u></u> | Tubing Setting Depth: <u></u> | Tbg setting date: <u></u> | Packer Depth: <u></u> |  |
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| Tubing Size: <u></u>  | Tubing Setting Depth: <u></u>  | Tbg setting date: <u></u>   | Packer Depth: <u></u>  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| Reason for Non-Production:<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div>   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| Date formation Abandoned: <u></u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt <u></u><br>Bridge Plug Depth: <u></u> Sacks cement on top: <u></u>  |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |
| Comment:<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div>   |  |   |  |                                       |                                     |   |  |  |  |  |                     |   |                                     |   |                        |                     |                          |  |                              |                      |                      |                            |  |                      |                               |                           |                       |  |

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

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: 5/18/2011 Email CARA.MAHLER@ANADARKO.COM  
:

### **Attachment Check List**

| Att Doc Num | Name              |
|-------------|-------------------|
| 400166404   | FORM 5A SUBMITTED |

Total Attach: 1 Files

### **General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b> | <b><u>Comment Date</u></b> |
|--------------------------|-----------------------|----------------------------|
|                          |                       |                            |

Total: 0 comment(s)