


<b>FORM 5A</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 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;">2584721</div>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>COMPLETED INTERVAL REPORT</b>							
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>10091</u>		4. Contact Name: <u>KALLASANDRA MORAN</u>					
2. Name of Operator: <u>BERRY PETROLEUM COMPANY</u>		Phone: <u>(303) 399-4225</u>					
3. Address: <u>1999 BROADWAY STE 3700</u>		Fax: <u>(303) 999-4325</u>					
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>					
5. API Number <u>05-045-19591-00</u>		6. County: <u>GARFIELD</u>					
7. Well Name: <u>CHEVRON</u>		Well Number: <u>19-21D</u>					
8. Location: QtrQtr: <u>LOT 1</u>	Section: <u>19</u>	Township: <u>5S</u>	Range: <u>96W</u> Meridian: <u>6</u>				
9. Field Name: <u>GRAND VALLEY</u>		Field Code: <u>31290</u>					
<u>Completed Interval</u>							
FORMATION: <u>WILLIAMS FORK</u>		Status: <u>PRODUCING</u>					
Treatment Date: <u>09/21/2010</u>		Date of First Production this formation: <u>10/04/2010</u>					
Perforations Top: <u>9222</u>	Bottom: <u>9568</u>	No. Holes: <u>22</u>	Hole size: <u>34/100</u>				
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
FRAC'D 1 STAGE OF INITIAL COMPLETION FROM 9222' TO 9568' @ SPF (22 SHOTS). FRAC'D WITH 145,160 LBS 30/50 WHITE SAND AND 7,435 BBLS SLICKWATER FLUID. LED WITH 500 GAL 7.5% ACID.							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>Test Information:</b>							
Date: <u>10/05/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>200</u> Bbls H2O: <u>99</u>				
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>200</u> Bbls H2O: <u>99</u> GOR: <u>        </u>				
Test Method: <u>FLOWING</u>	Casing PSI: <u>900</u>	Tubing PSI: <u>370</u>	Choke Size: <u>20</u>				
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1007</u>	API Gravity Oil: <u>0</u>				
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>9291</u>	Tbg setting date: <u>10/01/2010</u>	Packer Depth: <u>        </u>				
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>							
Date formation Abandoned: <u>        </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u>        </u>				
Bridge Plug Depth: <u>        </u>		Sacks cement on top: <u>        </u>					
Comment: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></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: KALLASANDRA MORAN

Title: PERMITTING AGENT Date: 10/6/2010 Email KMORAN@BRY-CONSULTANT.COM  
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### **Attachment Check List**

Att Doc Num	Name
2584721	FORM 5A SUBMITTED
2584722	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	req form 5, logs, D/S, cmt tkts 4/21/11	4/21/2011 8:24:33 AM

Total: 1 comment(s)