

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 columns: DE, ET, OE, ES

Document Number:

400178430

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-
4. Contact Name: CARA MAHLER
Phone: (720) 929-6029
Fax: (720) 929-7029

5. API Number 05-123-16621-00
6. County: WELD
7. Well Name: SCHNEIDER FARMS
Well Number: 33-33
8. Location: QtrQtr: NWSE Section: 33 Township: 1N Range: 67W Meridian: 6
9. Field Name: SPINDLE Field Code: 77900

Completed Interval

FORMATION: CODELL Status: COMMINGLED
Treatment Date: 06/07/2011 Date of First Production this formation: 07/27/1994
Perforations Top: 7853 Bottom: 7862 No. Holes: 9 Hole size: 0.32
Provide a brief summary of the formation treatment: Open Hole: []
REMOVED CIBP SET @ 7800'
This formation is commingled with another formation: [X] 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:

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 06/07/2011 Date of First Production this formation: 08/26/1994

Perforations Top: 7420 Bottom: 8320 No. Holes: 123 Hole size: 0.32

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

REMOVED CIBP SET @ 7800' TO CM J/CDL WITH NB

This formation is commingled with another formation: Yes No

Test Information:

Date: 06/20/2011 Hours: 24 Bbls oil: 2 Mcf Gas: 10 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 2 Mcf Gas: 10 Bbls H2O: 0 GOR: 5000

Test Method: FLOWING Casing PSI: 556 Tubing PSI: 446 Choke Size: _____

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1221 API Gravity Oil: 45

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: _____

FORMATION: J SAND Status: PRODUCING

Treatment Date: 06/07/2011 Date of First Production this formation: 02/26/1993

Perforations Top: 8292 Bottom: 8320 No. Holes: 45 Hole size: 0.38

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

REMOVED CIBP SET @ 7800'

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: _____

FORMATION: NIOBRARA Status: COMMINGLED

Treatment Date: 06/07/2011 Date of First Production this formation: 06/08/2010

Perforations Top: 7420 Bottom: 7708 No. Holes: 69 Hole size: 0.42

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

FIXING STATUS.

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:

THIS WELL IS ON THE KERR MCGEE O&G #47120 DELINQUENCY LIST. THIS IS THE MOST CURRENT STATUS. FROM 08/2001- 05/2010 CDL COMMINGLED. 05/2010- 09/2010 CDL TEMP ABND. ALL FORMATIONS PRODUCING NOW.

NO CHOKE.

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: 6/23/2011 Email CARA.MAHLER@ANADARKO.COM

Attachment Check List

Att Doc Num	Name
400178430	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)