

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



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Document Number:

400205469

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: 10084  
2. Name of Operator: PIONEER NATURAL RESOURCES USA INC  
3. Address: 1401 17TH ST STE 1200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Judy Glinisty  
Phone: (303) 675-2658  
Fax: (303) 294-1275

5. API Number 05-071-09630-00  
6. County: LAS ANIMAS  
7. Well Name: Jake  
Well Number: 21-15 Tr  
8. Location: QtrQtr: NENW Section: 15 Township: 32S Range: 66W Meridian: 6  
9. Field Name: PURGATOIRE RIVER Field Code: 70830

Completed Interval

FORMATION: RATON COAL Status: PRODUCING  
Treatment Date: 08/26/2011 Date of First Production this formation: 08/31/2011  
Perforations Top: 864 Bottom: 1819 No. Holes: 252 Hole size: 0.48  
Provide a brief summary of the formation treatment: Open Hole: ☐  
Fraced intervals at 864' - 867', 894' - 897', 899' - 902', 907' - 909', 936' - 939', 963' - 968', 992' - 998', 1003' - 1005', 1041' - 1046', 1117' - 1120', 1144' - 1147', 1189' - 1193', 1419' - 1422', 1641' - 1644', 1691' - 1695', 1715' - 1717', 1768' - 1771', 1781' - 1784', 1816' - 1819'. 16/30 - 349,837# - N2 - 26,827 hscf - 2,243 bbls 15# linear - no HCl.  
This formation is commingled with another formation: ☐ Yes ☒ No  
Test Information:  
Date: 09/03/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 48 Bbls H2O: 153  
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 48 Bbls H2O: 153 GOR: 0  
Test Method: Pumping Casing PSI: 60 Tubing PSI: 0 Choke Size: 17/64  
Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 1004 API Gravity Oil: 0  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 1845 Tbg setting date: 08/30/2011 Packer Depth: 0  
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: Judy Glinisty  
Title: Sr. Engineering Tech Date: Email: Judy.Glinisty@pxd.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

**Attachment Check List**

Att Doc Num	Name
400205487	WELLBORE DIAGRAM

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)