

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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COMPLETED INTERVAL REPORT

Document Number: 400229690

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: 69175
2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION
3. Address: 1775 SHERMAN STREET - STE 3000
City: DENVER State: CO Zip: 80203
4. Contact Name: Jeff Glossa
Phone: (303) 831-3972
Fax: (303) 860-5838

5. API Number 05-045-16105-00
6. County: GARFIELD
7. Well Name: Puckett
Well Number: 11C-24D
8. Location: QtrQtr: NWNW Section: 24 Township: 6S Range: 97W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING
Treatment Date: 09/16/2011 Date of First Production this formation: 10/21/2011
Perforations Top: 8110 Bottom: 8665 No. Holes: 72 Hole size: 5/16
Provide a brief summary of the formation treatment: Open Hole: [ ]
Frac'd using 16556 bbls of slickwater gel and 205400# of 30/50 Ottawa, 103973# 30/50 Tejas gold
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 11/01/2011 Hours: 24 Bbls oil: 1 Mcf Gas: 357 Bbls H2O: 11
Calculated 24 hour rate: Bbls oil: 1 Mcf Gas: 357 Bbls H2O: 11 GOR: 35700
Test Method: Flowing Casing PSI: 782 Tubing PSI: 425 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1073 API Gravity Oil: 58
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8718 Tbg setting date: 10/10/2011 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:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: Print Name: Jeff Glossa
Title: Sr Engineering Tech Date: 12/6/2011 Email: jglossa@petd.com

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
400229690	FORM 5A SUBMITTED

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