

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

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.

Document Number:

400233276

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

5. API Number 05-071-09038-00	6. County: LAS ANIMAS
7. Well Name: POLLYWOG	Well Number: 23-3
8. Location: QtrQtr: NESW Section: 3 Township: 32S Range: 66W Meridian: 6	
9. Field Name: PURGATOIRE RIVER	Field Code: 70830

Completed Interval

FORMATION: RATON COALStatus: PRODUCINGTreatment Date: 04/20/2011Date of First Production this formation: 05/05/2011Perforations Top: 581 Bottom: 1532 No. Holes: 188 Hole size: 0.48

Provide a brief summary of the formation treatment:

Open Hole: ☐

Fraced Raton formation 581' - 586', 695' - 697', 702' - 704', 706' - 708', 733' - 735', 890' - 893', 907' - 914', 1079' - 1081', 1153' - 1157', 1384' - 1386', 1419' - 1422', 1426' - 1428', 1441' - 1443', 1493' - 1495', 1498' - 1500', 1505' - 1508', 1530' - 1532'.
16/30 - 243,721# - N2 - 24,356 hcf - 1,827 bbls 15# linear - 168 gals 15% HCl - 42 gals 7.5% HCl.

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 05/07/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 75 Bbls H2O: 70Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 75 Bbls H2O: 70 GOR: 0Test Method: Pumping Casing PSI: 52 Tubing PSI: 0 Choke Size: 24/64Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 1004 API Gravity Oil: 0Tubing Size: 2 + 7/8 Tubing Setting Depth: 1573 Tbg setting date: 05/03/2011 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: _____

FORMATION: VERMEJO COALStatus: TEMPORARILY ABANDONED

Treatment Date: _____

Date of First Production this formation: _____

Perforations Top: 1953 Bottom: 2013 No. Holes: 52 Hole size: 0.48

Provide a brief summary of the formation treatment:

Open Hole: ☐

CIBP set at 1700' on 5-3-2011 to abandon Vermejo formation

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:

CIBP

Date formation Abandoned: 05/03/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____Bridge Plug Depth: 1700 Sacks cement on top: _____

Comment:

CORRECTED FROM PREVIOUS FORM 5A DATED 5-16-2011 TO REPORT THE RATON AND VERMEJO FORMATIONS SEPARATELY.

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

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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
400233297	WELLBORE DIAGRAM
400233298	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

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Total: 0 comment(s)