

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:

400223879

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: 10079 4. Contact Name: Hannah Knopping
2. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION Phone: (303) 357-6412
3. Address: 1625 17TH ST STE 300 Fax: (303) 357-7315
City: DENVER State: CO Zip: 80202

5. API Number 05-045-15167-00 6. County: GARFIELD
7. Well Name: NORCROSS Well Number: A15
8. Location: QtrQtr: NESW Section: 13 Township: 6S Range: 93W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: COZZETTE Status: PRODUCING

Treatment Date: 09/09/2011 Date of First Production this formation: 06/04/2008

Perforations Top: 8350 Bottom: 8373 No. Holes: 6 Hole size: 0.42

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

A portion of the COZZ is T&A'd from 8445' - 8552'

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:

Upper portion of COZZ is still producing

Date formation Abandoned: 09/09/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____

Bridge Plug Depth: 8445 Sacks cement on top: 4

FORMATION: CORCORAN Status: TEMPORARILY ABANDONED

Treatment Date: 09/09/2011 Date of First Production this formation: 06/04/2008

Perforations Top: 8621 Bottom: 8708 No. Holes: 39 Hole size: 0.42

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

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:

CRCRN is T&A'd by CIBP

Date formation Abandoned: 09/09/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____

Bridge Plug Depth: 8445 Sacks cement on top: 4

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 05/24/2008 Date of First Production this formation: 06/04/2008

Perforations Top: 6821 Bottom: 7768 No. Holes: 150 Hole size: 0.42

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

(Original Frac) - Frac'd with 33,673 bbls of 2% KCL & 754,400 lbs 20/40 sand

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: WILLIAMS FORK-ILESStatus: COMMINGLEDTreatment Date: 09/09/2011Date of First Production this formation: 06/04/2008Perforations Top: 6821 Bottom: 8373 No. Holes: 156 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

See individual formations for summary of formation treatment. Original Perfs - 6 (COZZ Open) + 150 (WFCM Open) = 156

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 09/18/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 294 Bbls H2O: 19Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 294 Bbls H2O: 19 GOR: 0Test Method: Flowing Casing PSI: 678 Tubing PSI: 511 Choke Size: 30/64Gas Disposition: SOLD Gas Type: WET BTU Gas: 1073 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7555 Tbg setting date: 09/11/2011 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: Hannah KnoppingTitle: Permit Representative Date: 12/28/2011 Email hknopping@anteroresources.com

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Attachment Check List

Att Doc Num	Name
400223879	FORM 5A SUBMITTED
400223962	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)