

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:

400241836

1. OGCC Operator Number: 47120

4. Contact Name: CARA MAHLER

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6029

3. Address: P O BOX 173779

Fax: (720) 929-7029

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-25790-00

6. County: WELD

7. Well Name: ANDERSEN

Well Number: 36-33

8. Location: QtrQtr: SESW Section: 33 Township: 4N Range: 65W Meridian: 6

9. Field Name: Field Code:

**Completed Interval**FORMATION: J-NIOBRARA-CODELLStatus: COMMINGLEDTreatment Date: 12/07/2011Date of First Production this formation: 01/09/2012Perforations Top: 6936 Bottom: 7706 No. Holes: 180 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: 01/15/2012 Hours: 24 Bbls oil: 7 Mcf Gas: 375 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 7 Mcf Gas: 375 Bbls H2O: 0 GOR: 53571Test Method: FLOWING Casing PSI: 841 Tubing PSI:        Choke Size: 18/64Gas Disposition: SOLD Gas Type: WET BTU Gas: 1207 API Gravity Oil: 61Tubing 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 SANDStatus: PRODUCINGTreatment Date: 12/07/2011Date of First Production this formation: 01/09/2012Perforations Top: 7686 Bottom: 7706 No. Holes: 60 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐Frac J-Sand down 4-1/2" Csg w/ 166,026 gal Slickwater w/ 160,540# 40/70, 4,000# SuperLC.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:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed:        Print Name: CARA MAHLERTitle: REGULATORY ANALYST 1 Date:        Email: CARA.MAHLER@ANADARKO.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

Total Attach: 0 Files

**General Comments**

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

Total: 0 comment(s)