

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:
400247737

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: 47120
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
3. Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-
4. Contact Name: CARA MAHLER
Phone: (720) 929-6029
Fax: (720) 929-7029

5. API Number 05-123-19648-00
6. County: WELD
7. Well Name: HSR-WARNER Well Number: 15-14
8. Location: QtrQtr: SWSE Section: 14 Township: 2N Range: 66W Meridian: 6
9. Field Name: _____ Field Code: _____

Completed Interval

FORMATION: <u>J-NIOBRARA-CODELL</u>	Status: <u>COMMINGLED</u>
Treatment Date: <u>01/09/2012</u>	Date of First Production this formation: <u>12/31/2001</u>
Perforations Top: <u>7422</u> Bottom: <u>8084</u>	No. Holes: <u>179</u> Hole size: <u>0.38</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
<u>REMOVE SAND PLUG @ 7820-7822 TO COMMINGLE JSND WITH NB/CD. RETURNED DOWNLINE ON 1/19/2012.</u>	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:	
Date: <u>01/30/2012</u> Hours: <u>24</u> Bbls oil: <u>2</u> Mcf Gas: <u>76</u> Bbls H2O: <u>0</u>	
Calculated 24 hour rate: Bbls oil: <u>2</u> Mcf Gas: <u>76</u> Bbls H2O: <u>0</u> GOR: <u>38000</u>	
Test Method: <u>FLOWING</u> Casing PSI: <u>365</u> Tubing PSI: <u>367</u> Choke Size: _____	
Gas Disposition: <u>SOLD</u> Gas Type: <u>WET</u> BTU Gas: <u>1294</u> API Gravity Oil: <u>53</u>	
Tubing Size: <u>2 + 3/8</u> Tubing Setting Depth: <u>8016</u> Tbg setting date: <u>01/10/2012</u> Packer Depth: _____	
Reason for Non-Production: _____	
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____	
Bridge Plug Depth: _____ Sacks cement on top: _____	

FORMATION: <u>J SAND</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>01/09/2012</u>	Date of First Production this formation: <u>08/18/1998</u>
Perforations Top: <u>8044</u> Bottom: <u>8084</u>	No. Holes: <u>40</u> Hole size: <u>0.35</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
<u>REMOVE SAND PLUG @ 7820-7822 TO COMMINGLE JSND WITH NB/CD.</u>	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____	
Bridge Plug Depth: _____ Sacks cement on top: _____	

Comment: <u>CHOKE N/A</u>

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Signed: _____	Print Name: <u>CARA MAHLER</u>
Title: <u>REGULATORY ANALYST 1</u> Date: _____	Email: <u>CARA.MAHLER@ANADARKO.COM</u>

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

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

Total: 0 comment(s)