

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:

400257745

Date Received:

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: 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 05-123-29378-00

6. County: WELD

7. Well Name: NELSON

Well Number: 9-35

8. Location: QtrQtr: NESE Section: 35 Township: 2N

Range: 68W Meridian: 6

9. Field Name: Field Code:

Completed Interval

FORMATION: J-NIOBRARA-CODELLStatus: COMMINGLEDTreatment Date: 01/25/2012Date of First Production this formation: 02/15/2012Perforations Top: 7480 Bottom: 8243 No. Holes: 190 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐JSND RECThis formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 03/01/2012 Hours: 24 Bbls oil: 2 Mcf Gas: 15 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 2 Mcf Gas: 15 Bbls H2O: 0 GOR: 7500Test Method: FLOWING Casing PSI: 1098 Tubing PSI: Choke Size: 26/64Gas Disposition: SOLD Gas Type: WET BTU Gas: 1349 API Gravity Oil: 53Tubing 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: 01/25/2012Date of First Production this formation: 02/15/2012Perforations Top: 8221 Bottom: 8243 No. Holes: 66 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐Frac JSND down casing w/ 165,396 gal slickwater w/ 117,160# 40/70, 4,000# 20/40.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: CARA.MAHLER@ANADARKO.COM

Email
:

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)