

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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.

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 05-123-33319-00
6. County: WELD
7. Well Name: PIONEER
Well Number: 26-11
8. Location: QtrQtr: SESE Section: 2 Township: 2N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED
Treatment Date: 12/20/2011 Date of First Production this formation: 11/07/2011
Perforations Top: 7632 Bottom: 7666 No. Holes: 48 Hole size: 0.38
Provide a brief summary of the formation treatment: JSND UNDER STUCK BIT COV W/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: JSND UNDER STUCK BIT COV W/SAND. Cut Tbg at 7602
Date formation Abandoned: 12/20/2011 Squeeze: Yes No If yes, number of sacks cmt
Bridge Plug Depth: 7602 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 MAHLER
Title: REGULATORY ANALYST 1 Date: 1/27/2012 Email: CARA.MAHLER@ANADARKO.COM

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
400246103	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

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

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