

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 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: 96850
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC
3. Address: 1001 17TH STREET - SUITE #1200
City: DENVER State: CO Zip: 80202
4. Contact Name: Matt Barber
Phone: (303) 606-4385
Fax: (303) 6298268

5. API Number 05-045-20221-00
6. County: GARFIELD
7. Well Name: ExxonMobil
Well Number: GM 322-26
8. Location: QtrQtr: LOT1 Section: 27 Township: 6S Range: 96W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING
Treatment Date: 10/20/2011 Date of First Production this formation: 10/30/2011
Perforations Top: 6394 Bottom: 8168 No. Holes: 124 Hole size: 0.35
Provide a brief summary of the formation treatment: Open Hole: [X]
2001 gal 7.5% HCL; 798203# 30/50 Sand; 27792 BBLs of Slickwater (Summary)
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 11/18/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 1025 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 2071 Tubing PSI: 1636 Choke Size: 11/64
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1075 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7964 Tbg setting date: 11/10/2011 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: Matt Barber
Title: Sr Regulatory Specialist Date: 3/6/2012 Email matt.barber@williams.com

### Attachment Check List

Att Doc Num	Name
400258647	FORM 5A SUBMITTED
400258663	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold; approved form 5	4/19/2012 11:22:45 AM
Permit	on hold pending approval of form 5	3/13/2012 1:11:42 PM

Total: 2 comment(s)