

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400274914

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: Cindy Vue
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6832
3. Address: P O BOX 173779 Fax: (720) 929-7832
City: DENVER State: CO Zip: 80217-

5. API Number 05-123-19099-00 6. County: WELD
7. Well Name: HSR-DECHANT FARMS Well Number: 9-36
8. Location: QtrQtr: NESE Section: 36 Township: 3N Range: 65W Meridian: 6
9. Field Name: _____ Field Code: _____

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 03/01/2012 Date of First Production this formation: 04/09/1996
Perforations Top: 7065 Bottom: 7077 No. Holes: 50 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

CD PERF 7065-7077 HOLES 50 SIZE 0.38
3/01/2012 Refrac CODL down 2.875" tbg w/ pkr ^ ni w/ 204,750 gal slickwater w/ 150,680# 40/70, 4,000# SB Excel.
Broke @ 3,218 psi @ 3 bpm. ATP=6,151 psi; MTP=7,385 psi; ATR=25.9 bpm; ISDP= psi
3/21/2012 RWTP UP TBG AFTER CD/NB RF. SUSX SQUEEZED. JSND UNDER PLUG.

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: _____

FORMATION: J SAND Status: TEMPORARILY ABANDONED

Treatment Date: 02/15/2012 Date of First Production this formation: 02/27/2003
Perforations Top: 7552 Bottom: 7568 No. Holes: 64 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole: ☐

TA W/ SAND PLUG @ 7296' FOR NB/CD REFRAC

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:

TA W/ SAND PLUG @ 7296' FOR NB/CD REFRAC

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 03/01/2012 Date of First Production this formation: 04/09/1996
Perforations Top: 6828 Bottom: 7077 No. Holes: 94 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole: ☐

NB PERF 6828-6831 HOLES 44 SIZE 0.42
CD PERF 7065-7077 HOLES 50 SIZE 0.38
3/21/2012 RWTP UP TBG AFTER CD/NB RF. SUSX SQUEEZED. JSND UNDER PLUG.

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 03/26/2012 Hours: 24 Bbls oil: 5 Mcf Gas: 60 Bbls H2O: 0
Calculated 24 hour rate: _____ Bbls oil: 5 Mcf Gas: 60 Bbls H2O: 0 GOR: 12000
Test Method: FLOWING Casing PSI: 1203 Tubing PSI: 1191 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1343 API Gravity Oil: 56
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7017 Tbg setting date: 05/08/2012 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: NIOBRARA Status: COMMINGLED

Treatment Date: 03/01/2012 Date of First Production this formation: 04/09/1996
Perforations Top: 6828 Bottom: 6831 No. Holes: 44 Hole size: 0.42

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

NB PERF 6828-6831 HOLES 44 SIZE 0.42

3/01/2012 Frac NBRR down 2.875" tbg w/ pkr ^ ni w/ 252 gal 15% HCl & 249,354 gal slickwater w/ 201,420# 40/70, 4,000# SB
Excel. Broke @ 5,801 psi @ 11.8 bpm. ATP=6,368 psi; MTP=6,953 psi; ATR=27.6 bpm; ISDP=3,805 psi

3/21/2012 RWTP UP TBG AFTER CD/NB RF. SUSX SQUEEZED. JSND UNDER PLUG.

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: _____

FORMATION: SUSSEX Status: PLUGGED AND ABANDONED

Treatment Date: 02/11/2012 Date of First Production this formation: 04/09/1996
Perforations Top: 4463 Bottom: 4468 No. Holes: 18 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

SQUEEZE CEMENT OVER SUSSEX PERF

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: _____

SQUEEZE CEMENT OVER SUSSEX PERF

Date formation Abandoned: 02/11/2012 Squeeze: ☒ Yes ☐ No If yes, number of sacks cmt 50

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: Cindy Vue

Title: Regulatory Analyst II

Date: _____

Email Cindy.Vue@anadarko.com

:

Attachment Check List

Att Doc Num	Name
400274954	CEMENT JOB SUMMARY
400274955	WIRELINER JOB SUMMARY

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)