

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:

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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: Eric Jansen

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6412

3. Address: P O BOX 173779

Fax: (720) 929-7412

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-20101-00

6. County: WELD

7. Well Name: HSR-SATER

Well Number: 1-8A

8. Location: QtrQtr: NENE Section: 8 Township: 2N

Range: 67W Meridian: 6

9. Field Name: Field Code:

Completed Interval

FORMATION: J-NIOBRARA-CODELL

Status: COMMINGLED

Treatment Date: 03/20/2012

Date of First Production this formation: 03/30/2012

Perforations Top: 7187 Bottom: 7915 No. Holes: 185 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

NB PERF 7187-7313 HOLES 60 SIZE .42
CD PERF 7440-7460 HOLES 60 SIZE .38
JS PERF 7870-7915 HOLES 65 SIZE .35
3/20/2012 - Cleared out sand plug over JS to commingle well
3/30/2012 - Commingled J-Niobrara-Codell production

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: 03/30/2012 Hours: 24 Bbls oil: 8 Mcf Gas: 15 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 8 Mcf Gas: 15 Bbls H2O: 0 GOR: 1875

Test Method: FLOWING Casing PSI: 730 Tubing PSI: 554 Choke Size:

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1307 API Gravity Oil: 49

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7831 Tbg setting date: 03/30/2012 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: J SAND

Status: PRODUCING

Treatment Date: 03/20/2012

Date of First Production this formation: 11/14/2000

Perforations Top: 7870 Bottom: 7915 No. Holes: 65 Hole size: 0.35

Provide a brief summary of the formation treatment:

Open Hole: ☐

JS PERF 7870-7915 HOLES 65 SIZE .35
3/20/2012 - Cleared out sand plug over JS to commingle well
3/30/2012 - Commingled J-Niobrara-Codell production

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: Eric Jansen _____

Title: Regulatory Specialist _____

Date: _____

Email : eric.jansen@anadarko.com _____

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)