

FORM
5A

Rev
02/08

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 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: 66561

2. Name of Operator: OXY USA INC

3. Address: PO BOX 27757

City: HOUSTON State: TX Zip: 77227

4. Contact Name: Joan Proulx

Phone: (970) 263-3641

Fax: (970) 263-3694

5. API Number 05-077-08858-00

7. Well Name: GUNDERSON

8. Location: QtrQtr: NWSE Section: 12 Township: 9S Range: 94W Meridian: 6

9. Field Name: BRUSH CREEK Field Code: 7562

6. County: MESA

Well Number: 12-6

Completed Interval

FORMATION: CORCORANStatus: PRODUCINGTreatment Date: 04/23/2005Date of First Production this formation: 07/08/2005Perforations Top: 8798 Bottom: 8898 No. Holes: 15 Hole size: 32/100

Provide a brief summary of the formation treatment:

Open Hole: ☐400 glns acid; 41,000 lbs white sand proppantThis formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 05/27/2012 Hours: 20 Bbls oil: 0 Mcf Gas: 30 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 36 Bbls H2O: 0 GOR: 0Test Method: Flowing Casing PSI: 674 Tubing PSI: 116 Choke Size: 28/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1015 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7587 Tbg setting date: 05/02/2012 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: WILLIAMS FORK - CAMEOStatus: PRODUCINGTreatment Date: 04/23/2005Date of First Production this formation: 07/08/2005Perforations Top: 6835 Bottom: 7956 No. Holes: 87 Hole size: 32/100

Provide a brief summary of the formation treatment:

Open Hole: ☐2,750 glns acid; 318,091 lbs white sand proppantThis formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 05/27/2012 Hours: 20 Bbls oil: 0 Mcf Gas: 120 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 143 Bbls H2O: 0 GOR: 0Test Method: Flowing Casing PSI: 674 Tubing PSI: 116 Choke Size: 28/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1015 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7587 Tbg setting date: 05/02/2012 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: _____

Comment:

Repair work occurred on this well to repair a hole in the tubing.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Joan ProulxTitle: Regulatory Analyst Date: _____ joan_proulx@oxy.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)