FORM 5A		
	DE	ET	OE	ES

<table>
<tr><td rowspan="2">FORM
5A
Rev
02/08</td><td colspan="2">State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

COMPLETED INTERVAL REPORT</td></tr>
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Document Number:

400290711

Date Received:

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: JOEL MALEFYT

    Phone: (720) 929-6828

    Fax: (720) 929-7828

5. API Number: 05-123-21333-00

6. County: WELD

7. Well Name: BURKHARDT   Well Number: 3-3A

8. Location: QtrQtr: NENW   Section: 3   Township: 1N   Range: 66W   Meridian: 6

9. Field Name: Field Code:

Completed Interval

FORMATION: J-NIOBRARA-CODELL   Status: COMMINGLED

Treatment Date: 05/02/2012   Date of First Production this formation: 05/11/2012

Perforations   Top: 7199   Bottom: 7987   No. Holes: 194   Hole size: 0.38

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

```
PERF NBRR 7199-7388 HOLES 62 SIZE .38
PERF CODL 7512-7527 HOLES 60 SIZE .38
PERF JSND 7964-7987 HOLES 72 SIZE .45
5/2/2012 DRILLED OUT SAND PLUG TO COMMINGLE PRODUCTION OF JSND WITH NB-CD
5/11/2012 PRODUCTION OF JSND COMMINGLED WITH NB-CD
```

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

Test Information:

Date: 05/13/2012   Hours: 24   Bbls oil: 5   Mcf Gas: 12   Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 5   Mcf Gas: 12   Bbls H2O: 0   GOR: 2400

Test Method: FLOWING   Casing PSI: 699   Tubing PSI: 368   Choke Size: 18/64

Gas Disposition: SOLD   Gas Type: WET   BTU Gas: 1323   API Gravity Oil: 51

Tubing Size: 2 + 3/8   Tubing Setting Depth: 7947   Tbg setting date: 05/03/2012   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: 05/02/2012   Date of First Production this formation: 05/13/2003

Perforations   Top: 7964   Bottom: 7987   No. Holes: 72   Hole size: 0.45

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

```
PERF JSND 7964-7987 HOLES 72 SIZE .45
5/2/2012 DRILLED OUT SAND PLUG TO COMMINGLE PRODUCTION OF JSND WITH NB-CD
5/11/2012 PRODUCTION OF JSND COMMINGLED WITH NB-CD
```

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: JOEL MALEFYT

Title: REGULATORY ANALYST   Date: _____   Email: JOEL.MALEFYT@ANADARKO.COM

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)