

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with 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 4. Contact Name: Julie Lawson
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 260-4533
3. Address: 1001 17TH STREET - SUITE #1200 City: DENVER State: CO Zip: 80202 Fax: (303) 629-8268

5. API Number 05-045-20486-00 6. County: GARFIELD
7. Well Name: Bosely Well Number: SG 431-27
8. Location: QtrQtr: NENE Section: 27 Township: 7S Range: 96W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type:

Treatment Date: 11/16/2011 End Date: Date of First Production this formation: 11/29/2011

Perforations Top: 4032 Bottom: 5163 No. Holes: 82 Hole size: 0.35

Provide a brief summary of the formation treatment: Open Hole: []

1500 gal 7.5% HCL; 769622# 30/50 sand; 16750 BBLs Slickwater, Summary

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): Max pressure during treatment (psi):
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal):
Type of gas used in treatment: Number of staged intervals:
Total acid used in treatment (bbl): Max frac gradient (psi/ft):
Recycled water used in treatment (bbl): Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): Disposition method for flowback:
Total proppant used (lbs): Rule 805 green completion techniques were utilized: []

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/06/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 826 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 826 Bbl H2O: 0 GOR: 0
Test Method: flowing Casing PSI: 539 Tubing PSI: 332 Choke Size: 16/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1066 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 4981 Tbg setting date: 11/29/2011 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: [] Yes [X] No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

Comment:

Please note: the "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

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

Signed: _____ Print Name: Julie Lawson

Title: Permit Tech II Date: 3/22/2012 Email julie.lawson@wpenergy.com

Attachment Check List

Att Doc Num	Name
400264222	FORM 5A SUBMITTED
400264229	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group **Comment** **Comment Date**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)