

Completed Interval

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

Treatment Date: 11/01/2011 End Date: 11/04/2011 Date of First Production this formation: 11/03/2011
Perforations Top: 6605 Bottom: 8728 No. Holes: 156 Hole size: _____

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

4647 Gals 7 1/2% HCL; 1182800# 40/70 Sand; 53814 Bbbs Slickwater; (Summary)
*All flowback water entries are total estimates based on comingled volumes.
Please note: the "as-drilled" GPS information provided is actual data of the existing well conductor location prior to the big rig spud date.

This formation is comingled with another formation: Yes No
Total fluid used in treatment (bbl): 58461 Max pressure during treatment (psi): _____
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43
Type of gas used in treatment: _____ Max frac gradient (psi/ft): 0.69
Total acid used in treatment (bbl): 4647 Number of staged intervals: 7
Recycled water used in treatment (bbl): 53814 Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE
Total proppant used (lbs): 1182800 Rule 805 green completion techniques were utilized:
Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/13/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1119 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1119 Bbl H2O: 0 GOR: 0
Test Method: flowing Casing PSI: 2369 Tubing PSI: 1837 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1053 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8507 Tbg setting date: 12/13/2011 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: _____ ** Wireline and Cement Job Summary must be attached.

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.
*All flowback water entries are total estimates based on comingled volumes.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: _____ Print Name: Angela Neifert-Kraiser
Title: Regulatory Specialist Date: 6/27/2012 Email: Angela.Neifert-Kraiser@WPXEnergy.com

Attachment Check List

Att Doc Num	Name
400300086	FORM 5A SUBMITTED
400300091	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)