

FORMATION: ROLLINS Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/16/2012 End Date: 01/16/2012 Date of First Production this formation: 01/19/2012
Perforations Top: 8142 Bottom: 8258 No. Holes: 20 Hole size: _____

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

435 Gals 7 1/2% HCL; 166170# 20/40 Sand; 6808Bbls Slickwater; (Summary)

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.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 7243 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): 0.76

Total acid used in treatment (bbl): 435 Number of staged intervals: 1

Recycled water used in treatment (bbl): 6808 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE

Total proppant used (lbs): 166170 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl 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: _____ ** Wireline and Cement Job Summary must be attached.

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

Treatment Date: 01/16/2012 End Date: 01/18/2012 Date of First Production this formation: 01/19/2012
Perforations Top: 5737 Bottom: 8098 No. Holes: 264 Hole size: _____

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

4565 Gals 7 1/2% HCL; 1513330# 20/40 Sand & 28000 100 MESH; 63725 Bbls Slickwater; (Summary)

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.

This formation is comingled with another formation: Yes No

Total fluid used in treatment (bbl): 68290 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): 0.56

Total acid used in treatment (bbl): 4565 Number of staged intervals: 9

Recycled water used in treatment (bbl): 63725 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE

Total proppant used (lbs): 1541330 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: _____ Bbl oil: _____ Mcf Gas: _____ Bbl 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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: WILLIAMS FORK-ILES Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/16/2012 End Date: 01/18/2012 Date of First Production this formation: 01/19/2012
Perforations Top: 5737 Bottom: 8258 No. Holes: 284 Hole size: _____

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

5000 Gals 7 1/2% HCL; 1679500# 20/40 Sand & 28000 100 mesh; 70533 Bbls Slickwater; (Summary)
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.

This formation is comingled with another formation: Yes No

Total fluid used in treatment (bbl): 75533 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): 0.56
Total acid used in treatment (bbl): 5000 Number of staged intervals: 9
Recycled water used in treatment (bbl): 70533 Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE
Total proppant used (lbs): 1707500 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 03/18/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1219 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1219 Bbl H2O: 0 GOR: 0
Test Method: flowing Casing PSI: 1384 Tubing PSI: 994 Choke Size: 48/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1266 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6998 Tbg setting date: 01/20/2012 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: _____ ** 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: _____ Email: Angela.Neifert-Kraiser@WPXEnergy.com

Attachment Check List

Att Doc Num	Name
400306176	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)