

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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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: 96850
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC
3. Address: 1001 17TH STREET - SUITE #1200
City: DENVER State: CO Zip: 80202
4. Contact Name: Matt Barber
Phone: (303) 606-4385
Fax: (303) 629-8268

5. API Number 05-045-19223-00
6. County: GARFIELD
7. Well Name: CHEVRON
Well Number: TR 42-34-597
8. Location: QtrQtr: SESE Section: 27 Township: 5S Range: 97W Meridian: 6
9. Field Name: TRAIL RIDGE Field Code: 83825

Completed Interval

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

Treatment Date: 08/26/2011 End Date: 09/12/2011 Date of First Production this formation: 11/01/2011

Perforations Top: 7048 Bottom: 8943 No. Holes: 162 Hole size: 0.35

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

4,006 gals 7.5 HCL; 1,165,800# 20/40 Sand; 31,000# 100-MESH Sand; 31,053

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

Total fluid used in treatment (bbl): 31148 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): 0.45

Total acid used in treatment (bbl): 95 Number of staged intervals: 8

Recycled water used in treatment (bbl): 3153 Flowback volume recovered (bbl):

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

Total proppant used (lbs): 1196800 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/25/2012 Hours: 254 Bbl oil: Mcf Gas: 823 Bbl H2O:

Calculated 24 hour rate: Bbl oil: Mcf Gas: 823 Bbl H2O: GOR:

Test Method: Flowing Casing PSI: 292 Tubing PSI: 293 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1055 API Gravity Oil:

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8767 Tbg setting date: 07/11/2012 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:

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

Signed: _____ Print Name: Matt Barber

Title: Sr. Regulatory Specialist Date: _____ Email: matt.barber@wpenergy.com
:

Attachment Check List

Att Doc Num	Name
400321415	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)