FORM 5A Rev 06/12 State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2109 Image: Colorado 80203 Phone: (303) 894-2109 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 Date Received: 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 Fax: (303) 629-8268 City: DENVER State: CO Zip: 80202							
Rev 06/12 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109 Document Number: 400325224 The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is section for each formation. Attach as many pages as required to fully describe the work. List in order of completion. Fill out a Date Received: 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 Fax: (303) 629-8268							
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City: DENVER State: CO Zip: 80202							
5. API Number 05-045-21021-00 6. County: GARFIELD							
7. Well Name: Patterson Well Number: SG 434-27							
8. Location: QtrQtr: SESW 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: FRACTURE							
STIMULATION							
Treatment Date:08/01/2012End Date:08/03/2012Date of First Production this formation:08/09/2012PerforationsTop:3950Bottom:5045No. Holes:93Hole size:0.35							
Provide a brief summary of the formation treatment: Open Hole: 442000# 40/70 Sand; 12220 BBLS Slickwater.							
This formation is commingled with another formation:							
Total fluid used in treatment (bbl): 12220 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): 0.61							
Total acid used in treatment (bbl): Number of staged intervals: 4							
I otal acid used in treatment (bbl):							
Fresh water used in treatment (bbl): Disposition method for flowback: RECYCLE							
Total proppant used (lbs): 442000 Rule 805 green completion techniques were utilized:							
Reason why green completion not utilized:							
Fracture stimulations must be reported on FracFocus.org							
Test Information:							
Date: 08/31/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 733 Bbl H2O: 0							
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 733 Bbl H2O: 0 GOR: 0							
Test Method: Flowing Casing PSI: 660 Tubing PSI: 498 Choke Size: 14/64							
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1075 API Gravity Oil: 0							
Tubing Size: 2 + 3/8 Tubing Setting Depth: 4943 Tbg setting date: 08/08/2012 Packer Depth:							
Reason for Non-Production:							
Date formation Abandoned: Squeeze: Tyes No If yes, number of sacks cmt							

Comment:					
I hereby certify a	all statements made in this for	m are, to the best	of my knowledge,	true, correct, and cor	mplete.
Signed:			Print Name:	Julie Lawson	
Title: Permit Tech II		Date:	: Email julie.lawson@wpxenergy.com		
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		Attachme	ent Check Lis	<u>st</u>	
Att Doc Num	Name				
400325230	WELLBORE DIAGRAM	1			
Total Attach: 1 F	iles				
		<u>Gener</u>	al Comments		
<u>User Group</u>	Comment				Comment Date
Total: 0 comme	ent(s)				