

FORM  
5A

Rev  
06/12

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

2622429

Date Received:

09/27/2012

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: ANNIE SMITH  
Phone: (303) 606-4363  
Fax: (303) 629-8275

5. API Number 05-045-14806-00  
6. County: GARFIELD  
7. Well Name: AP  
Well Number: 332-24-696  
8. Location: QtrQtr: SENW Section: 24 Township: 6S Range: 96W Meridian: 6  
9. Field Name: Field Code:

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type:  
Treatment Date: 08/18/2008 End Date: Date of First Production this formation: 08/26/2008  
Perforations Top: 8676 Bottom: 10457 No. Holes: 177 Hole size: 36/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

6,540 GAL ACID BEFORE FRAC. 34,905 BBLS WTR. 1,041,400# 30/50 SAND.

This formation is commingled with another formation: ☐ Yes ☒ 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:

Min frac gradient (psi/ft):

Total acid used in treatment (bbl):

Number of staged intervals:

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: 10/29/2009 Hours: 24 Bbl oil: Mcf Gas: 2200 Bbl H2O:  
Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:  
Test Method: FLOWING Casing PSI: 1700 Tubing PSI: 1400 Choke Size: 20/64  
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1030 API Gravity Oil:  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 10241 Tbg setting date: 10/20/2008 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:

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

Signed: \_\_\_\_\_ Print Name: ANNIE SMITH

Title: ENGINEER TECH Date: 10/18/2008 Email ANNIE.SMITH@WILLIAMS.COM  
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### **Attachment Check List**

Att Doc Num	Name
2622429	

Total Attach: 1 Files

### **General Comments**

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

Total: 0 comment(s)