

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:

400325830

Date Received:

09/11/2012

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: Sandra Salazar  
Phone: (303) 629-8456  
Fax: (303) 629-8268

5. API Number 05-045-10624-00  
6. County: GARFIELD  
7. Well Name: FEDERAL  
Well Number: RWF 542-17  
8. Location: QtrQtr: SENE Section: 17 Township: 6S Range: 94W Meridian: 6  
9. Field Name: RULISON Field Code: 75400

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type:  
Treatment Date: End Date: Date of First Production this formation:  
Perforations Top: 6028 Bottom: 8036 No. Holes: 105 Hole size: 0.35

Provide a brief summary of the formation treatment:

Open Hole: ☐

Cement squeeze perfs 6028-6288'.

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: 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: 2 + 3/8 Tubing Setting Depth: 7784 Tbg setting date: 04/18/2012 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: ☒ Yes ☐ No If yes, number of sacks cmt 135

\*\* Bridge Plug Depth: \*\* Sacks cement on top: \*\* Wireline and Cement Job Summary must be attached.

Comment:

This form is REVISED to report the work done. (Water Shut – Off) Squeezed the MV 5 at (6,028' – 6,288') w/135 sx 17ppg Class G cement, drilled out cement and pressure tested squeeze holes to 1,000 psi (tested good), land tbg @ 7,784' w/ 247 jts on 4/18/12, attempt to return well to production.

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

Signed: \_\_\_\_\_ Print Name: Sandra Salazar

Title: Permit Technician II Date: 9/11/2012 Email sandra.salazar@wpenergy.com  
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### **Attachment Check List**

Att Doc Num	Name
400325830	FORM 5A SUBMITTED
400325833	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	Cement squeeze 6028-6288'.	11/8/2012 10:05:00 AM

Total: 1 comment(s)