

**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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**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: <u>47120</u>	4. Contact Name: <u>JOEL MALEFYT</u>
2. Name of Operator: <u>KERR-MCGEE OIL &amp; GAS ONSHORE LP</u>	Phone: <u>(720) 929-6828</u>
3. Address: <u>P O BOX 173779</u>	Fax: <u>(720) 929-7828</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	

5. API Number <u>05-123-34370-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>CLARK</u>	Well Number: <u>35C-11HZ</u>
8. Location: QtrQtr: <u>NWNW</u> Section: <u>11</u> Township: <u>1N</u> Range: <u>66W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

### Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION  
Treatment Date: 10/01/2012 End Date: 10/02/2012 Date of First Production this formation: 10/08/2012  
Perforations Top: 8070 Bottom: 12152 No. Holes: 0 Hole size: 0  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

FRAC'D THROUGH AN OPEN HOLE LINER FROM 8070-12152.  
1073500# 40/70, 2233920# 30/50, 160080# SUPER LC, 3467500# TOTAL.

This formation is commingled with another formation:  Yes  No  
Total fluid used in treatment (bbl): 72405 Max pressure during treatment (psi): 6742  
Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.30  
Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): \_\_\_\_\_  
Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: 20  
Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): 13113  
Fresh water used in treatment (bbl): 35867 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 3467500 Rule 805 green completion techniques were utilized:   
Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

#### Test Information:

Date: 10/30/2012 Hours: 24 Bbl oil: 524 Mcf Gas: 720 Bbl H2O: 0  
Calculated 24 hour rate: Bbl oil: 524 Mcf Gas: 720 Bbl H2O: 0 GOR: 1375  
Test Method: FLOWING Casing PSI: 2111 Tubing PSI: 1752 Choke Size: 16/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1299 API Gravity Oil: 44  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7517 Tbg setting date: 10/15/2012 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: JOEL MALEFYT  
Title: REGULATORY ANALYST Date: \_\_\_\_\_ Email: JOEL.MALEFYT@ANADARKO.COM

### Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)