

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



DE ET OE ES

Document Number:

400385457

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 05-103-11875-00
6. County: RIO BLANCO
7. Well Name: Federal
Well Number: RGU 423-25-198
8. Location: QtrQtr: LOT14 Section: 25 Township: 1S Range: 98W Meridian: 6
9. Field Name: SULPHUR CREEK Field Code: 80090

Completed Interval

FORMATION: CORCORAN Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/26/2012 End Date: 11/02/2012 Date of First Production this formation: 11/03/2012

Perforations Top: 12082 Bottom: 12419 No. Holes: 40 Hole size: 35/100

Provide a brief summary of the formation treatment: Open Hole: ☐

882 gals 10% HCL; 11,820# 20/40; 154,268# 30/50; 30,092# 100-MESH; 6,972 BBLS SLICKWATER

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 6993

Max pressure during treatment (psi): 4394

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.64

Total acid used in treatment (bbl): 21

Number of staged intervals: 2

Recycled water used in treatment (bbl): 6972

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 196180

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: Tubing Setting Depth: Tbg setting date: 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.

FORMATION: <u>SEGO</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>10/26/2012</u>		End Date: <u>11/02/2012</u>		Date of First Production this formation: <u>11/03/2012</u>	
Perforations	Top: <u>12456</u>	Bottom: <u>12707</u>	No. Holes: <u>32</u>	Hole size: <u>35/100</u>	

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

795 gals 10% HCL; 11,280# 20/40; 142,332# 30/50; 24,808#; 6,335 BBLS SLICKWATER

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): <u>6354</u>	Max pressure during treatment (psi): <u>4466</u>
Total gas used in treatment (mcf): _____	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.59</u>
Total acid used in treatment (bbl): <u>19</u>	Number of staged intervals: <u>2</u>
Recycled water used in treatment (bbl): <u>6335</u>	Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>178420</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

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: _____	Tubing Setting Depth: _____	Tbg setting date: _____	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.

FORMATION: <u>WILLIAMS FORK - CAMEO</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>10/26/2012</u>		End Date: <u>11/02/2012</u>		Date of First Production this formation: <u>11/03/2012</u>	
Perforations	Top: <u>10306</u>	Bottom: <u>11596</u>	No. Holes: <u>149</u>	Hole size: <u>35/100</u>	

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

3,521 gals 10% HCL; 43,800# 20/40; 630,800# 30/50; 51,100# 100-MESH; 23,689 BBLS Slickwater

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): <u>23772</u>	Max pressure during treatment (psi): <u>4085</u>
Total gas used in treatment (mcf): _____	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.61</u>
Total acid used in treatment (bbl): <u>83</u>	Number of staged intervals: <u>7</u>
Recycled water used in treatment (bbl): <u>23689</u>	Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>725700</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

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: _____	Tubing Setting Depth: _____	Tbg setting date: _____	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.

FORMATION: WILLIAMS FORK-ILES Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/26/2012 End Date: 11/02/2012 Date of First Production this formation: 11/03/2012

Perforations Top: 10306 Bottom: 12707 No. Holes: 221 Hole size: 35/100

Provide a brief summary of the formation treatment: _____ Open Hole: ☒

5,198 gals 10% HCL; 66,900# 20/40; 927,400# 30/50; 106,000# 100-MESH; 36,996 BBLS SLICKWATER

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 37120 Max pressure during treatment (psi): 4466

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.59

Total acid used in treatment (bbl): 124 Number of staged intervals: 11

Recycled water used in treatment (bbl): 36996 Flowback volume recovered (bbl): _____

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

Total proppant used (lbs): 1100300 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/31/2012 Hours: 24 Bbl oil: _____ Mcf Gas: 1539 Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: 1539 Bbl H2O: _____ GOR: _____

Test Method: Flowing Casing PSI: 2000 Tubing PSI: 1300 Choke Size: 17/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1075 API Gravity Oil: _____

Tubing Size: 2 + 3/8 Tubing Setting Depth: 12351 Tbg setting date: 12/07/2012 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
400385752	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)