

**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:
400394155

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: <u>96850</u>	4. Contact Name: <u>Angela Neifert-Kraiser</u>
2. Name of Operator: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Phone: <u>(303) 606-4398</u>
3. Address: <u>1001 17TH STREET - SUITE #1200</u>	Fax: <u>(303) 629-8272</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-045-20100-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>Savage</u>	Well Number: <u>PA 544-5</u>
8. Location: QtrQtr: <u>NESW</u> Section: <u>4</u> Township: <u>7S</u> Range: <u>95W</u> Meridian: <u>6</u>	
9. Field Name: <u>PARACHUTE</u> Field Code: <u>67350</u>	

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/24/2013 End Date: 01/30/2013 Date of First Production this formation: 01/27/2013

Perforations Top: 5532 Bottom: 7379 No. Holes: 129 Hole size: 35/100

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

772300#40/70 Sand; 21888 Bbls Slickwater; (Summary)

*All flowback water entries are total estimates based on comingled volumes.

This formation is comingled with another formation: Yes No

Total fluid used in treatment (bbl): 21888

Max pressure during treatment (psi): 3859

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): 0.57

Total acid used in treatment (bbl): _____

Number of staged intervals: 6

Recycled water used in treatment (bbl): 21888

Flowback volume recovered (bbl): 7249

Fresh water used in treatment (bbl): _____

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 772300

Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/28/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 607 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 607 Bbl H2O: 0 GOR: 0

Test Method: flowing Casing PSI: 1180 Tubing PSI: 739 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1043 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7199 Tbg setting date: 02/06/2013 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:

*All flowback water entries are total estimates based on comingled volumes.

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

Signed: _____ Print Name: Angela Neifert-Kraiser
Title: Regulatory Specialist Date: _____ Email: angela.neifert-kraiser@wpenergy.com

Attachment Check List

Att Doc Num	Name
400394166	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

User Group	Comment	Comment Date

Total: 0 comment(s)