

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:

400405207

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: 10255  
2. Name of Operator: QUICKSILVER RESOURCES INC  
3. Address: 801 CHERRY ST - #3700 UNIT 19  
City: FT WORTH State: TX Zip: 76102  
4. Contact Name: Tami Humphrey  
Phone: (817) 665-4876  
Fax: (817) 665-5009

5. API Number 05-081-07355-00  
6. County: MOFFAT  
7. Well Name: ANTIETAM  
Well Number: 11-12  
8. Location: QtrQtr: NWNW Section: 12 Township: 7N Range: 93W Meridian: 6  
9. Field Name: ENCORE Field Code: 21530

Completed Interval

FORMATION: WILLIAMS FORK COAL Status: TEMPORARILY ABANDONED Treatment Type:  
Treatment Date: End Date: Date of First Production this formation:  
Perforations Top: 3622 Bottom: 4007 No. Holes: 272 Hole size: 0.26  
Provide a brief summary of the formation treatment: Open Hole: ☐  
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: Tubing Setting Depth: Tbg setting date: Packer Depth:  
Reason for Non-Production: All production surface equipment has been removed. Evaluating multiple future development options, including use in developing deeper potential.  
Date formation Abandoned: 10/13/2009 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt  
\*\* Bridge Plug Depth: 3525 \*\* Sacks cement on top: 1 \*\* Wireline and Cement Job Summary must be attached.

Comment:

This Form 5A is only to update the status of the well to Temporarily Abandoned. The original Form 5A was submitted by Pioneer Natural Resources on 3/6/2008.

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

Signed: \_\_\_\_\_ Print Name: Tami Humphrey

Title: Regulatory Analyst Date: \_\_\_\_\_ Email : thumphrey@qrinc.com

### **Attachment Check List**

**Att Doc Num**      **Name**

400482650	WELLBORE DIAGRAM
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Total Attach: 1 Files

### **General Comments**

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)