

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:

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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>47120</u>	4. Contact Name: <u>Katie Kistner</u>
2. Name of Operator: <u>KERR-MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 9294317</u>
3. Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	

5. API Number <u>05-123-36817-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>GOBBLER</u>	Well Number: <u>2N-23HZ</u>
8. Location: QtrQtr: <u>SWSE</u> Section: <u>23</u> Township: <u>2N</u> Range: <u>66W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/23/2013 End Date: 09/25/2013 Date of First Production this formation: 10/05/2013

Perforations Top: 7711 Bottom: 11930 No. Holes: 0 Hole size: 0

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

COMPLETED THROUGH AN OPEN HOLE LINER FROM 7711-11930.
36 BBL ACID, 12221 BBL CROSSLINK GEL, 1567 BBL LINEAR GEL, 72482 BBL SLICKWATER, 86305 BBL TOTAL FLUID.
251244# 30/50 OTTAWA/ST. PETERS SAND, 1673326# 40/70 OTTAWA/ST. PETERS SAND, 1924570# TOTAL SAND.

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

Total fluid used in treatment (bbl):	86305	Max pressure during treatment (psi):	7623
Total gas used in treatment (mcf):	0	Fluid density at initial fracture (lbs/gal):	8.30
Type of gas used in treatment:		Min frac gradient (psi/ft):	0.89
Total acid used in treatment (bbl):	36	Number of staged intervals:	32
Recycled water used in treatment (bbl):	0	Flowback volume recovered (bbl):	6789
Fresh water used in treatment (bbl):	0	Disposition method for flowback:	DISPOSAL
Total proppant used (lbs):	1924570	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: 10/13/2013	Hours: 24	Bbl oil: 271	Mcf Gas: 369	Bbl H2O: 239
Calculated 24 hour rate:	Bbl oil: 271	Mcf Gas: 369	Bbl H2O: 239	GOR: 1362
Test Method: FLOWING	Casing PSI: 2085	Tubing PSI: 1703	Choke Size: 12/64	
Gas Disposition: SOLD	Gas Type: WET	Btu Gas: 1271	API Gravity Oil: 48	
Tubing Size: 2 + 3/8	Tubing Setting Depth: 7381	Tbg setting date: 10/09/2013	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:

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

Signed: _____ Print Name: Katie Kistner

Title: Regulatory Analyst Date: _____ Email: rscdjpostdrill@anadarko.com

Attachment Check List

Att Doc Num	Name
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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)