

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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, reoperation 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: 10084 2. Name of Operator: PIONEER NATURAL RESOURCES USA INC 3. Address: 1401 17TH ST STE 1200 City: DENVER State: CO Zip: 80202 4. Contact Name: Judy Glinisty Phone: (303) 675-2658 Fax: (303) 294-1275

5. API Number 05-071-07257-00 6. County: LAS ANIMAS 7. Well Name: SHANNON Well Number: 43-9 8. Location: QtrQtr: NESE Section: 9 Township: 33S Range: 65W Meridian: 6 9. Field Name: PURGATOIRE RIVER Field Code: 70830

Completed Interval

FORMATION: VERMEJO COAL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/01/2013 End Date: 11/01/2013 Date of First Production this formation: 06/25/2001 Perforations Top: 664 Bottom: 917 No. Holes: 152 Hole size: 0.48

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

Frac interval 914' - 917'. 16/30 - 16,620# - N2 - 1032 hscf - no acid

This formation is commingled with another formation: [ ] Yes [X] No

Total fluid used in treatment (bbl): 84 Max pressure during treatment (psi): 3450 Total gas used in treatment (mcf): 103 Fluid density at initial fracture (lbs/gal): 8.35 Type of gas used in treatment: NITROGEN Min frac gradient (psi/ft): 1.07 Total acid used in treatment (bbl): 0 Number of staged intervals: 1 Recycled water used in treatment (bbl): 84 Flowback volume recovered (bbl): 0 Fresh water used in treatment (bbl): 0 Disposition method for flowback: DISPOSAL Total proppant used (lbs): 16620 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/16/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 21 Bbl H2O: 8 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 21 Bbl H2O: 8 GOR: 0 Test Method: Pumping Casing PSI: 16 Tubing PSI: Choke Size: 16/64 Gas Disposition: SOLD Gas Type: COAL GAS Btu Gas: 1004 API Gravity Oil: 0 Tubing Size: 2 + 7/8 Tubing Setting Depth: 943 Tbg setting date: 11/13/2013 Packer Depth: 0

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:

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

Signed: \_\_\_\_\_ Print Name: Judy Glinisty

Title: Lead Engineering Tech Date: 12/5/2013 Email: Judy.Glinisty@pxd.com  
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### **Attachment Check List**

**Att Doc Num**      **Name**

400522386	FORM 5A SUBMITTED
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