

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:

400556766

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	4. Contact Name: Michele Weybright
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC	Phone: (303) 629-8449
3. Address: 1001 17TH STREET - SUITE #1200	Fax: (303) 629-8268
City: DENVER State: CO Zip: 80202	Email: michele.veybright@wpxenergy.com

5. API Number 05-103-11900-00	6. County: RIO BLANCO
7. Well Name: Federal	Well Number: RG 411-23-298
8. Location: QtrQtr: SESW Section: 14 Township: 2S Range: 98W Meridian: 6	
9. Field Name: SULPHUR CREEK	Field Code: 80090

Completed Interval

FORMATION: <u>CORCORAN</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>12/01/2013</u>		End Date: <u>12/01/2013</u>		Date of First Production this formation: <u>12/14/2013</u>	
Perforations	Top: <u>10248</u>	Bottom: <u>10460</u>	No. Holes: <u>24</u>	Hole size: <u>35/100</u>	

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

500 Gals 10% HCL; 127887# 40/70 Sand; 8750# 20/40 Sand; 4747 Bbls Slickwater; (Summary)

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

Total fluid used in treatment (bbl): <u>4758</u>	Max pressure during treatment (psi): <u>4616</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.62</u>
Total acid used in treatment (bbl): <u>11</u>	Number of staged intervals: <u>1</u>
Recycled water used in treatment (bbl): <u>4747</u>	Flowback volume recovered (bbl): <u>28456</u>
Fresh water used in treatment (bbl): _____	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>136637</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>SEGO</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>11/30/2013</u>		End Date: <u>11/30/2013</u>		Date of First Production this formation: <u>12/14/2013</u>	
Perforations	Top: <u>10594</u>	Bottom: <u>10896</u>	No. Holes: <u>48</u>	Hole size: <u>35/100</u>	

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

1000 Gals 10% HCL; 243905# 40/70 Sand; 18250# 20/40 Sand; 9206 Bbls Slickwater; (Summary)

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

Total fluid used in treatment (bbl): <u>9229</u>	Max pressure during treatment (psi): <u>4616</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.43</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.62</u>
Total acid used in treatment (bbl): <u>23</u>	Number of staged intervals: <u>2</u>
Recycled water used in treatment (bbl): <u>9206</u>	Flowback volume recovered (bbl): <u>28456</u>
Fresh water used in treatment (bbl): _____	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>262155</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>12/01/2013</u>		End Date: <u>12/06/2013</u>		Date of First Production this formation: <u>12/14/2013</u>	
Perforations	Top: <u>7046</u>	Bottom: <u>9818</u>	No. Holes: <u>232</u>	Hole size: <u>35/100</u>	

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

5000 Gals 10% HCL; 1223157# 40/70 Sand; 83750# 20/40 Sand; 44622 Bbls Slickwater; (Summary)

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

Total fluid used in treatment (bbl): <u>44741</u>	Max pressure during treatment (psi): <u>4616</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>0.62</u>
Total acid used in treatment (bbl): <u>119</u>	Number of staged intervals: <u>10</u>
Recycled water used in treatment (bbl): <u>44622</u>	Flowback volume recovered (bbl): <u>28456</u>
Fresh water used in treatment (bbl): _____	Disposition method for flowback: <u>RECYCLE</u>
Total proppant used (lbs): <u>1306907</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: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 11/30/2013 End Date: 12/06/2013 Date of First Production this formation: 12/14/2013
Perforations Top: 7046 Bottom: 10896 No. Holes: 304 Hole size: 35/100
Provide a brief summary of the formation treatment: Open Hole: ☐

6500 Gals 10% HCL; 1594949# 40/70 Sand; 110750# 20/40 Sand; 58575 Bbls Slickwater; (Summary)

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

Total fluid used in treatment (bbl): 58729

Max pressure during treatment (psi): 4616

Total gas used in treatment (mcf): 0

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

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.62

Total acid used in treatment (bbl): 154

Number of staged intervals: 13

Recycled water used in treatment (bbl): 58575

Flowback volume recovered (bbl): 28456

Fresh water used in treatment (bbl): _____

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 1705699

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/28/2014 Hours: 24 Bbl oil: 0 Mcf Gas: 1728 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1728 Bbl H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 2284 Tubing PSI: 1616 Choke Size: 16/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1100 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 9963 Tbg setting date: 12/15/2013 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 commingled volumes.

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

Signed: _____ Print Name: Michele L Weybright

Title: Permit Technician I Date: _____ Email michele.veybright@wpenergy.com

Attachment Check List

Att Doc Num **Name**

400556872 WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)