

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400627058

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: 47120

2. Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

3. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

4. Contact Name: Katie Kistner

Phone: (720) 9294317

Fax:

Email: katie.kistner@anadarko.com

5. API Number 05-123-38338-00

7. Well Name: BADDING

8. Location: QtrQtr: SESE Section: 26 Township: 2N Range: 66W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 16N-35HZ

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/12/2014 End Date: 05/15/2014 Date of First Production this formation: 06/10/2014

Perforations Top: 7434 Bottom: 13191 No. Holes: 0 Hole size: 0

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

COMPLETED THROUGH AN OPEN HOLE LINER FROM 7434-13191.
500 BBL ACID, 18101 BBL CROSSLINK GEL, 12184 BBL LINEAR GEL, 75376 BBL SLICKWATER, 106161 BBL TOTAL FLUID.
550880# 30/50 OTTAWA/ST. PETERS SAND, 3226920# 40/70 OTTAWA/ST. PETERS SAND, 3777800# TOTAL SAND.

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

Total fluid used in treatment (bbl):	106161	Max pressure during treatment (psi):	7885
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):	0.85
Total acid used in treatment (bbl):	500	Number of staged intervals:	34
Recycled water used in treatment (bbl):	4750	Flowback volume recovered (bbl):	513
Fresh water used in treatment (bbl):	100911	Disposition method for flowback:	DISPOSAL
Total proppant used (lbs):	3777800	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:	06/14/2014	Hours:	24	Bbl oil:	322	Mcf Gas:	534	Bbl H2O:	3
Calculated 24 hour rate:		Bbl oil:	322	Mcf Gas:	534	Bbl H2O:	3	GOR:	1658
Test Method:	FLOWING	Casing PSI:	1500	Tubing PSI:		Choke Size:	14/64		
Gas Disposition:	SOLD	Gas Type:	WET	Btu Gas:	1371	API Gravity Oil:	47		
Tubing Size:		Tubing Setting Depth:		Tbg setting date:		Packer Depth:			
Reason for Non-Production:									
Date formation Abandoned:		Squeeze:	<input type="checkbox"/> Yes <input type="checkbox"/> 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
-------------	------

--	--

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)