

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: 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 05-123-38784-00

7. Well Name: ELLIOTT

8. Location: QtrQtr: SENE Section: 18 Township: 3N Range: 67W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 32N-18HZ

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/27/2014 End Date: 07/30/2014 Date of First Production this formation: 08/24/2014

Perforations Top: 7366 Bottom: 11094 No. Holes: 456 Hole size: 0.37

Provide a brief summary of the formation treatment:

Open Hole: ☐

PERF AND FRAC FROM 7366-11094.
24 BBL ACID, 73413 BBL SLICKWATER, 2166 BBL WATER, 75603 BBL TOTAL FLUID.
2224886# 40/70 GENOA/SAND HILLS, 2224886# TOTAL SAND.

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

Total fluid used in treatment (bbl): 75603

Max pressure during treatment (psi): 7630

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): 1.02

Total acid used in treatment (bbl): 24

Number of staged intervals: 19

Recycled water used in treatment (bbl): 2290

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): 73289

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 2224886

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/01/2014 Hours: 24 Bbl oil: 275 Mcf Gas: 395 Bbl H2O: 85

Calculated 24 hour rate: Bbl oil: 275 Mcf Gas: 395 Bbl H2O: 85 GOR: 1436

Test Method: FLOWING Casing PSI: 1100 Tubing PSI: _____ Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1374 API Gravity Oil: 50

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.

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

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Total: 0 comment(s)