

<b>FORM 5A</b> Rev 06/12	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>COMPLETED INTERVAL REPORT</b>			Document Number: 400795245  Date Received:				
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> 2. Name of Operator: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u> 3. Address: <u>P O BOX 173779</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	4. Contact Name: <u>Kayla Hesseltine</u> Phone: <u>(720) 929-6552</u> Fax: _____ Email: <u>kayla.hesseltine@anadarko.com</u>
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5. API Number <u>05-123-39397-00</u> 7. Well Name: <u>BENSON FARMS</u> 8. Location: QtrQtr: <u>NWSW</u> Section: <u>24</u> Township: <u>3N</u> 9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	6. County: <u>WELD</u> Well Number: <u>12C-23HZ</u> Range: <u>68W</u> Meridian: <u>6</u>
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**Completed Interval**

FORMATION: <u>CODELL</u>	Status: <u>PRODUCING</u>	Treatment Type: <u>FRACTURE STIMULATION</u>
Treatment Date: <u>12/10/2014</u>	End Date: <u>12/17/2014</u>	Date of First Production this formation: <u>01/21/2015</u>
Perforations Top: <u>7787</u>	Bottom: <u>13268</u>	No. Holes: <u>672</u> Hole size: <u>0.37</u>

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

PERF AND FRAC FROM 7787-13268.  
 104,210 BBL SLICKWATER, 4,780 BBL WATER, 108,990 BBL TOTAL FLUID.  
 3,143,681# 40/70 GENOA/SAND HILLS, 3,143,681# TOTAL SAND.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): <u>108990</u>	Max pressure during treatment (psi): <u>7189</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.30</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.77</u>
Total acid used in treatment (bbl): <u>0</u>	Number of staged intervals: <u>28</u>
Recycled water used in treatment (bbl): <u>0</u>	Flowback volume recovered (bbl): <u>1077</u>
Fresh water used in treatment (bbl): <u>108990</u>	Disposition method for flowback: <u>DISPOSAL</u>
Total proppant used (lbs): <u>3143681</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: <u>02/11/2015</u>	Hours: <u>24</u>	Bbl oil: <u>191</u>	Mcf Gas: <u>315</u>	Bbl H2O: <u>1010</u>
Calculated 24 hour rate:	Bbl oil: <u>191</u>	Mcf Gas: <u>315</u>	Bbl H2O: <u>1010</u>	GOR: <u>1649</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>950</u>	Tubing PSI: _____	Choke Size: <u>14/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	Btu Gas: <u>1245</u>	API Gravity Oil: <u>50</u>	
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:

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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: Kayla Hesseltime

Title: Regulatory Specialist Date: \_\_\_\_\_ Email: kayla.hesseltime@anadarko.com

### Attachment Check List

**Att Doc Num**      **Name**

400795245	FORM 5A SUBMITTED
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)