

**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:  
400948045

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: <u>47120</u>	4. Contact Name: <u>ILA BEALE</u>
2. Name of Operator: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u>	Phone: <u>(720) 929-6408</u>
3. Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	Email: <u>ila.beale@anadarko.com</u>

5. API Number <u>05-123-41002-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>MILK STATE</u>	Well Number: <u>28N-21HZ</u>
8. Location: QtrQtr: <u>SESW</u> Section: <u>21</u> Township: <u>3N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/10/2015 End Date: 11/16/2015 Date of First Production this formation: 11/21/2015  
Perforations Top: 7406 Bottom: 12600 No. Holes: 600 Hole size: 0.46

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

"PERF AND FRAC FROM 7406-12,600.  
369 BBL ACID, 133,908 BBL SLICKWATER, 2,564 BBL TREATED WATER, - 136,841 BBL TOTAL FLUID  
546,150# 100 MESH OTTAWA, 3,573,290# 40/70 OTTAWA, - 4,119,440# TOTAL SAND."

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 136841 Max pressure during treatment (psi): 7860  
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): 0.95  
Total acid used in treatment (bbl): 369 Number of staged intervals: 25  
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 2349  
Fresh water used in treatment (bbl): 136472 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 4119440 Rule 805 green completion techniques were utilized:   
Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

#### Test Information:

Date: 11/30/2015 Hours: 24 Bbl oil: 76 Mcf Gas: 392 Bbl H2O: 394  
Calculated 24 hour rate: Bbl oil: 76 Mcf Gas: 392 Bbl H2O: 394 GOR: 5158  
Test Method: FLOWING Casing PSI: 1700 Tubing PSI: Choke Size: 14/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1277 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: ILA BEALE  
Title: STAFF REG. SPECIALIST Date: \_\_\_\_\_ Email: ila.beale@anadarko.com

### Attachment Check List

**Att Doc Num** **Name**

\_\_\_\_\_

Total Attach: 0 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)