

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:  
401037397

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: Jennifer Thomas  
Phone: (720) 929-6808  
Fax: \_\_\_\_\_  
Email: jennifer.thomas@anadarko.com

5. API Number 05-123-41496-00  
6. County: WELD  
7. Well Name: ENGLISH FARMS  
Well Number: 34C-9HZ  
8. Location: QtrQtr: NENE Section: 8 Township: 1N Range: 65W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: NIOBRARA-FORT HAYS-CODELL-CARLILE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/03/2016 End Date: 04/07/2016 Date of First Production this formation: 04/19/2016  
Perforations Top: 7790 Bottom: 12005 No. Holes: 316 Hole size: 0.42

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

PERF AND FRAC FROM 7790-12005.  
19 BBL ACID, 87,721 BBL SLICKWATER, 3,147 BBL WATER, 90,887 BBL TOTAL FLUID,  
421,098 # 100 MESH OTTAWA/ST. PETERS, 2,175,304# 40/70 OTTAWA/ST. PETERS, 2,596,402# TOTAL SAND.  
ENTERED NIOBRARA 10,389 - 10,404;  
FORT HAYS 10,404 - 10,539;  
CODELL 7,790 - 7,851; 8,004-10,389; 10,539-10,710; 11,023 - 12,005;  
CARLILE 7,851 - 8,004; 10,710 - 11,023  
THIS IS A DESIGNATED SOURCE OF SUPPLY WELL (SEE ATTACHMENT).

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 90887 Max pressure during treatment (psi): 7671  
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): 19 Number of staged intervals: 13  
Recycled water used in treatment (bbl): 450 Flowback volume recovered (bbl): 5301  
Fresh water used in treatment (bbl): 90418 Disposition method for flowback: RECYCLE  
Total proppant used (lbs): 2596402 Rule 805 green completion techniques were utilized:   
Reason why green completion not utilized:

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

#### Test Information:

Date: 04/30/2016 Hours: 24 Bbl oil: 103 Mcf Gas: 183 Bbl H2O: 0  
Calculated 24 hour rate: Bbl oil: 103 Mcf Gas: 183 Bbl H2O: 0 GOR: 1776  
Test Method: FLOWING Casing PSI: 1910 Tubing PSI: Choke Size: 14/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1400 API Gravity Oil: 46  
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: Jennifer Thomas  
Title: Regulatory Specialist Date: Email: jennifer.thomas@anadarko.com

### Attachment Check List

| Att Doc Num | Name  |
|-------------|-------|
| 401037404   | OTHER |

Total Attach: 1 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> |
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Total: 0 comment(s)