

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:

400971087

Date Received:

02/01/2016

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>05-123-39709-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>FRONT RANGE FARMS</u>	Well Number: <u>15N-14HZ</u>
8. Location: QtrQtr: <u>NWSE</u> Section: <u>11</u> Township: <u>1N</u> Range: <u>68W</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: 12/23/2015 End Date: 01/03/2016 Date of First Production this formation: 01/08/2016  
Perforations Top: 8061 Bottom: 15182 No. Holes: 840 Hole size: 0.46

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

"PERF AND FRAC FROM 8061-15,182.  
428 BBL ACID, 193,046 BBL SLICKWATER, 6,600 BBL WATER, - 200,074 BBL TOTAL FLUID  
6,106,894# 40/70 GENOA/SAND HILLS, - 6,106,894# TOTAL SAND."

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 200074 Max pressure during treatment (psi): 7498

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: Min frac gradient (psi/ft): 0.77

Total acid used in treatment (bbl): 428 Number of staged intervals: 35

Recycled water used in treatment (bbl): 450 Flowback volume recovered (bbl): 3186

Fresh water used in treatment (bbl): 199196 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 6106894 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

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

#### Test Information:

Date: 01/13/2016 Hours: 24 Bbl oil: 122 Mcf Gas: 361 Bbl H2O: 387

Calculated 24 hour rate: Bbl oil: 122 Mcf Gas: 361 Bbl H2O: 387 GOR: 2959

Test Method: FLOWING Casing PSI: 950 Tubing PSI: Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1391 API Gravity Oil: 47

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: 2/1/2016 Email: ila.beale@anadarko.com

### Attachment Check List

Att Doc Num	Name
400971087	FORM 5A SUBMITTED

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>
		Stamp Upon Approval

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