

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:

04/14/2015

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 & 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>05-123-39496-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>CRUICKSHANK</u>	Well Number: <u>27N-24HZ</u>
8. Location: QtrQtr: <u>SESE</u> Section: <u>24</u> Township: <u>3N</u> Range: <u>66W</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: 03/19/2015 End Date: 03/24/2015 Date of First Production this formation: 03/28/2015
Perforations Top: 7886 Bottom: 13209 No. Holes: 648 Hole size: 0.37

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

"PERF AND FRAC FROM 7886-13,209.
631 BBL ACID, 148,196 BBL SLICKWATER, 3,184 BBL WATER, - 152,011 BBL TOTAL FLUID
1,390,740# 30/50 OTTAWA/ST. PETERS, 3,077,850# 40/70 OTTAWA/ST. PETERS, - 4,468,590# TOTAL SAND."

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 152011 Max pressure during treatment (psi): 7679

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): 0.94

Total acid used in treatment (bbl): 631 Number of staged intervals: 27

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1273

Fresh water used in treatment (bbl): 151380 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 4468590 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/04/2015 Hours: 24 Bbl oil: 124 Mcf Gas: 590 Bbl H2O: 600

Calculated 24 hour rate: Bbl oil: 124 Mcf Gas: 590 Bbl H2O: 600 GOR: 4758

Test Method: FLOWING Casing PSI: 1700 Tubing PSI: Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1207 API Gravity Oil: 56

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: 4/14/2015 Email: rscdjpostdrill@anadarko.com

Attachment Check List

Att Doc Num	Name
400824001	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)