

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:
401256902

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: ILA BEALE
Phone: (720) 929-6408
Fax: _____
Email: ila.beale@anadarko.com

5. API Number 05-123-41555-00
6. County: WELD
7. Well Name: CARTER
Well Number: 36N-33HZ
8. Location: QtrQtr: NENW Section: 33 Township: 2N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/22/2017 End Date: 03/30/2017 Date of First Production this formation: 04/09/2017
Perforations Top: 7816 Bottom: 12357 No. Holes: 1080 Hole size: 0.44

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

"PERF AND FRAC FROM 7816-12357.
867 BBL 7.5% HCL ACID, 8,427 BBL PUMP DOWN, 159,475 BBL SLICKWATER, - 168,769 BBL TOTAL FLUID
1,366,619# 40/70 OTTAWA/ST. PETERS, - 1,366,619# TOTAL SAND."

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 168769 Max pressure during treatment (psi): 7908

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): 867 Number of staged intervals: 45

Recycled water used in treatment (bbl): 10480 Flowback volume recovered (bbl): 4241

Fresh water used in treatment (bbl): 157422 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 1366619 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/20/2017 Hours: 24 Bbl oil: 157 Mcf Gas: 202 Bbl H2O: 372

Calculated 24 hour rate: Bbl oil: 157 Mcf Gas: 202 Bbl H2O: 372 GOR: 1286

Test Method: FLOWING Casing PSI: 1900 Tubing PSI: Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1296 API Gravity Oil: 53

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:
THIS WELL HAD A DELAYED COMPLETION. THE TPZ FOOTAGES ON FORM 5 ARE CORRECT AND DO NOT NEED REVISION.

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

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)