

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:

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>05-123-42623-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>JAGUAR FED</u>	Well Number: <u>35N-35HZ</u>
8. Location: QtrQtr: <u>SESW</u> Section: <u>23</u> Township: <u>1N</u> Range: <u>67W</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: 07/09/2017 End Date: 07/22/2017 Date of First Production this formation: 07/29/2017
Perforations Top: 7843 Bottom: 17694 No. Holes: 885 Hole size: 0.44

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

"PERF AND FRAC FROM 7843-17694.
729 BBL 7.5% HCL ACID, 11,749 BBL PUMP DOWN, 267,937 BBL SLICKWATER, - 280,415 TOTAL FLUID
7,917,700# 40/70 OTTAWA/ST. PETERS, - 7,917,700# TOTAL SAND."

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 280415 Max pressure during treatment (psi): 7943

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): 0.89

Total acid used in treatment (bbl): 729 Number of staged intervals: 37

Recycled water used in treatment (bbl): 540 Flowback volume recovered (bbl): 3334

Fresh water used in treatment (bbl): 279146 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 7917700 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/13/2017 Hours: 24 Bbl oil: 151 Mcf Gas: 209 Bbl H2O: 390

Calculated 24 hour rate: Bbl oil: 151 Mcf Gas: 209 Bbl H2O: 390 GOR: 1384

Test Method: FLOWING Casing PSI: 1750 Tubing PSI: Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1304 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:

THIS WELL HAD A DELAYED COMPLETION. THE ESTIMATED TPZ FOOTAGES ON FORM 5 SHOULD BE REVISED TO 31 FNL 1488 FWL SEC 26.

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

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)