

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:

401300512

Date Received:

06/15/2017

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.

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|---|--------------------------------------|
| 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> |

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|--|------------------------------|
| 5. API Number <u>05-123-41294-00</u> | 6. County: <u>WELD</u> |
| 7. Well Name: <u>WILSON RANCH</u> | Well Number: <u>31N-27HZ</u> |
| 8. Location: QtrQtr: <u>SENE</u> Section: <u>26</u> Township: <u>4N</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: 04/29/2017 End Date: 05/07/2017 Date of First Production this formation: 05/23/2017
Perforations Top: 7512 Bottom: 16353 No. Holes: 696 Hole size: 0.46

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

"PERF AND FRAC FROM 7,512-16,353.
552 BBL 7.5% HCL ACID, 7,266 BBL PUMP DOWN, 208,368 BBL SLICKWATER, - 216,186 TOTAL FLUID
7,264,419# 40/70 OTTAWA/ST. PETERS - 7,264,419# TOTAL SAND."

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 216186

Max pressure during treatment (psi): 7755

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): 552

Number of staged intervals: 33

Recycled water used in treatment (bbl): 5907

Flowback volume recovered (bbl): 13997

Fresh water used in treatment (bbl): 209727

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 7264419

Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/05/2017 Hours: 24 Bbl oil: 12 Mcf Gas: 22 Bbl H2O: 277
Calculated 24 hour rate: Bbl oil: 12 Mcf Gas: 22 Bbl H2O: 277 GOR: 1833
Test Method: FLOWING Casing PSI: 1850 Tubing PSI: _____ Choke Size: 23/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1327 API Gravity Oil: 54
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 1475 FNL, 1190 FEL 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: 6/15/2017 Email: ila.beale@anadarko.com

Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 401300512 | FORM 5A SUBMITTED |

Total Attach: 1 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|---|---------------------|
| Permit | Changed total proppant used from 172,962 to 7,264,419 lbs | 09/20/2017 |

Total: 1 comment(s)