

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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Date Received:

09/30/2017

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.

1. OGCC Operator Number: 100264

2. Name of Operator: XTO ENERGY INC

3. Address: 600 E EXCHANGE AVE

City: FORTH WORTH State: TX Zip: 76164

4. Contact Name: Dee Johnson

Phone: (505) 333-3164

Fax:

Email: dee_johnson@xtoenergy.com

5. API Number 05-071-08732-00

7. Well Name: GOLDEN EAGLE

8. Location: QtrQtr: SWNE Section: 28 Township: 33S Range: 67W Meridian: 6

9. Field Name: PURGATOIRE RIVER Field Code: 70830

6. County: LAS ANIMAS

Well Number: 28-7X

Completed Interval

FORMATION: VERMEJO COAL Status: TEMPORARILY ABANDONED Treatment Type: _____
Treatment Date: _____ End Date: _____ Date of First Production this formation: 08/08/2006
Perforations Top: 1663 Bottom: 1834 No. Holes: 40 Hole size: 0.46
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

****Perf Top CORRECTION from 1696' to 1663'****

06/09/2015: MIRU. TOH w/rods & rotor. Tgd @ 1,916' (16' fill). Vermejo perms fr/1,663' - 1,834'. TOH w/ 2-7/8" tbg & stator.

06/10/2015: Set CIBP @ 1,770'. TIH w/stator & 2-7/8", 6.5#, J-55 tbg. EOT @ 1,754. Vermejo perms fr/1,663' - 1,756'. TIH w/rotor & rods. RDMO. Std PC pmp @ 100 RPM & RWTP @ 2:30 a.m. 6/10/15. FR for zone Isolation.

04/25/2017: MIRU. TOH w/rods & rotor. Tgd @ 1,916' (16' fill). Vermejo perms fr/1,663' - 1,756'. TOH w/ 2-7/8" tbg & stator. Set CIBP @ 1,646'. PT 5-1/2" csg to 375 psig w/1 BPW. Tstd OK. RDMO. SWI. WO MIT.

05/12/2017: Peformed MIT

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): _____

Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____

Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____

Number of staged intervals: _____

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____

Disposition method for flowback: _____

Total proppant used (lbs): _____

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: TA'd due to economics

Date formation Abandoned: 04/25/2017 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____

** Bridge Plug Depth: 1646 ** Sacks cement on top: 0 ** 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: Dolena Johnson

Title: Sr. Regulatory Anaylst Date: 9/30/2017 Email: dee_johnson@xtoenergy.com

Attachment Check List

Att Doc Num	Name
401417560	FORM 5A SUBMITTED
401417561	WIRELINE JOB SUMMARY
401417562	WIRELINE JOB SUMMARY
401417563	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)