

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:

401438921

Date Received:

11/03/2017

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: <u>47120</u>	4. Contact Name: <u>ILA BEALE</u>
2. Name of Operator: <u>KERR MCGEE OIL &amp; 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>05-123-43343-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>CAMENISCH</u>	Well Number: <u>30N-35HZ</u>
8. Location: QtrQtr: <u>SWSW</u> Section: <u>2</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: 09/01/2017 End Date: 09/11/2017 Date of First Production this formation: 10/06/2017  
Perforations Top: 8086 Bottom: 13961 No. Holes: 1266 Hole size: 0.44

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

"PERF AND FRAC FROM 8086-13,961.  
48 BBL 15% HCL ACID, 1,029 BBL 7.5% HCL ACID, 10,880 BBL PUMP DOWN, 204,245 BBL SLICKWATER, - 216,201 TOTAL FLUID  
1,743,525# 40/70 OTTAWA/ST. PETERS, - 1,743,525# TOTAL SAND."

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 216201 Max pressure during treatment (psi): 7974

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): 0.82

Total acid used in treatment (bbl): 1076 Number of staged intervals: 56

Recycled water used in treatment (bbl): 23589 Flowback volume recovered (bbl): 16032

Fresh water used in treatment (bbl): 191536 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 1743525 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

#### Test Information:

Date: 10/16/2017 Hours: 24 Bbl oil: 231 Mcf Gas: 339 Bbl H2O: 28

Calculated 24 hour rate: Bbl oil: 231 Mcf Gas: 339 Bbl H2O: 28 GOR: 1468

Test Method: FLOWING Casing PSI: 1500 Tubing PSI: Choke Size: 32/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1249 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 ESTIMATED 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: 11/3/2017 Email: ila.beale@anadarko.com

### Attachment Check List

Att Doc Num	Name
401438921	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Form 7 missing Sept-Nov -2017 Form 5A, Doc #401438921 has been approved for NBRR	11/06/2017

Total: 1 comment(s)