

FORM
5A
Rev 8/96

State of Colorado
Oil and Gas Conservation Commission
DEPARTMENT OF NATURAL RESOURCES

FOR OGCC USE ONLY
RECEIVED
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OGCC
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	<i>[Signature]</i>		

COMPLETED INTERVAL REPORT

This form is to be submitted or updated each time a new formation is completed or abandoned. This form shall be transmitted within (30) days of work. Additional information is found under Rule 308. Complete a section for each formation completed or recompleted including all attempted completions. Attach as many pages as required to fully describe the work.

Complete the
Attachment Checklist

OGCC Operator Number: 67305	4. Contact Name & Phone	Oper	OGCC
Name of Operator: Patina Oil & Gas Corporation	James Annable	Wellbore Diagram	<input checked="" type="checkbox"/>
Address: 1625 Broadway, Suite 2000	No: 303-389-3610	Site Facility Diagram	
City: Denver State: CO Zip: 80202	Fax: 303-595-7411		
API Number: 05-123-18174			
Well Name: DPG Bird Farm Number: 1-15 H 5			
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSE Section 1-T5N-R65W			

FORMATION: CODL (Refrac) Producing N Commingled **OGCC**

Perforations Gross Interval: <i>Top</i> 6913' <i>Bottom</i> 6925'	No. Holes: 48	Size:	Open Hole Completion
Formation Treatment <i>Describe:</i> 133,644 gal Vistar 26/27# Gel & 245,460# 20/40 Ottawa Sand			
Test Information C/N	Date: 10/17/02	Hours: 6	Bbls Oil: 10
			MCF Gas: 86
			Bbls H ₂ O: 5
Production Test Method: Flowing	Casing Pressure: 810	Flowing Tubing Pressure: 500	Choke Size: 22/64
API Gravity Oil:	BTU Gas:	Gas Disposition: Sold	
Calculated 24 Hr Rate	Bbls Oil: 40	MCF Gas: 344	Bbls H ₂ O: 20
			GOR: 9
Production Method: Flowing			
Tubing Size: 2-1/16"	Setting Depth: 6877'	Packer Depth:	
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason Shut in:			
Abandonment of Zone	Date:	Squeezed:	Sacks Cement:
Bridge Plug Depth:	Sacks Cement on Top:		

FORMATION: Producing N Commingled **OGCC**

Perforations Gross Interval: <i>Top</i>	<i>Bottom</i>	No. Holes:	Size:	Open Hole Completion
Formation Treatment <i>Describe:</i>				
Test Information	Date:	Hours:	Bbls Oil:	MCF Gas:
				Bbls H ₂ O:
Production Test Method:	Casing Pressure:	Flowing Tubing Pressure:	Choke Size	
API Gravity Oil:	BTU Gas:	Gas Disposition:		
Calculated 24 Hr Rate	Bbls Oil:	MCF Gas:	Bbls H ₂ O:	GOR
Production Method:				
Tubing Size:	Setting Depth:	Packer Depth:		
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason Shut in:				
Abandonment of Zone	Date:	Squeezed:	Sacks Cement:	
Bridge Plug Depth:	Sacks Cement on Top:			

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: James Annable
Signed: *[Signature]* Title: Regulatory Engineer Date: 10/24/02