

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:

401167088

Date Received:

12/15/2016

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: 47120

2. Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

3. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-

4. Contact Name: ILA BEALE

Phone: (720) 929-6408

Fax:

Email: ila.beale@anadarko.com

5. API Number 05-123-41978-00

7. Well Name: MEGUIRE

8. Location: QtrQtr: SENW Section: 21 Township: 2N Range: 65W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 3N-16HZ

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/03/2016 End Date: 11/17/2016 Date of First Production this formation: 11/20/2016  
Perforations Top: 7491 Bottom: 15014 No. Holes: 1800 Hole size: 0.46

Provide a brief summary of the formation treatment:

Open Hole: ☐

"PERF AND FRAC FROM 7491-15014.

1,186 BBL 7.5% HCL ACID, 20,611 BBL PUMP DOWN, 264,531 BBL SLICKWATER, - 286,328 BBL TOTAL FLUID

2,260,498# 40/70 PREMIUM, - 2,260,498# TOTAL SAND."

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

Total fluid used in treatment (bbl): 286328

Max pressure during treatment (psi): 7887

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): 0.93

Total acid used in treatment (bbl): 1186

Number of staged intervals: 75

Recycled water used in treatment (bbl): 1725

Flowback volume recovered (bbl): 8339

Fresh water used in treatment (bbl): 283417

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 2260498

Rule 805 green completion techniques were utilized: ☒

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

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

#### Test Information:

Date: 11/29/2016 Hours: 24 Bbl oil: 328 Mcf Gas: 657 Bbl H2O: 438  
Calculated 24 hour rate: Bbl oil: 328 Mcf Gas: 657 Bbl H2O: 438 GOR: 2003  
Test Method: FLOWING Casing PSI: 1900 Tubing PSI: \_\_\_\_\_ Choke Size: 14/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1268 API Gravity Oil: 51  
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 TPZ FOOTAGES SHOULD BE REVISED TO 2528 FNL; W LINE FOOTAGE UNCHANGED.

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: 12/15/2016 Email: ila.beale@anadarko.com

### Attachment Check List

**Att Doc Num** **Name**

401167088 FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Form 7 missing Mar-Aug 2016 Operator: Meguire 3N-16HZ - Choke size needs to be corrected to 14/64 Form 5A, Doc #401167088 has been approved for NBRR	11/28/2017

Total: 1 comment(s)