

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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, reoperation 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: 16700 2. Name of Operator: CHEVRON USA INC 3. Address: 100 CHEVRON RD City: RANGELY State: CO Zip: 81648 4. Contact Name: ROY CRAMER Phone: (970) 675-3719 Fax: (970) 675-3800 Email: RWCR@CHEVRON.COM

5. API Number 05-103-05651-00 6. County: RIO BLANCO 7. Well Name: FEE Well Number: 12 8. Location: QtrQtr: SWNE Section: 28 Township: 2N Range: 102W Meridian: 6 9. Field Name: RANGELY Field Code: 72370

Completed Interval

FORMATION: WEBER Status: SHUT IN Treatment Type: Treatment Date: End Date: Date of First Production this formation: 02/26/1946 Perforations Top: 5864 Bottom: 6472 No. Holes: 120 Hole size: 1/2 Provide a brief summary of the formation treatment: Open Hole: This formation is commingled with another formation: 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: 2 + 7/8 Tubing Setting Depth: 5652 Tbg setting date: 11/12/2014 Packer Depth:

Reason for Non-Production: WELL SHUT IN 4/3/17 FOR PUMP REPAIR, WELL BEING EVALUATED FOR RETURN TO PRODUCTION. THE WELL IS ISOLATED FROM THE ATMOSPHERE BY CLOSED VALVES ON THE WELLHEAD ASSEMBLY. IF YOU HAVE ANY QUESTIONS CONCERNING THIS WELL PLEASE CONTACT CHEVRON PE ROY CRAMER.

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:

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

Signed: _____ Print Name: DIANE
Title: PERMIT SPECIALIST Date: 1/17/2018 Email: DLPE@CHEVRON.COM
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401516654	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)