

Oil and Gas Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

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 thirty (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.

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OGCC

Complete the Attachment Checklist

OGCC Operator Number: 72085	Contact Name & Phone	Wellbore diagram	Oper	OGCC
Name of Operator: Prima Oil & Gas Company	Shawn Elworthy	Site Facility Diagram	X	
Address: 1801 Broadway, Suite 500	No: (303) 297-2300			
City: Denver State: CO Zip: 80202	Fax: (303) 297-7708			
API Number : 05- 123-18430				
Well Name: Swafford	Number: 11-11			
Location (QtrQtr, Sec, Twp, Rng, Meridian):	NE NE Sec 11-T5N-R67W			

List in order of completion.

FORMATION: Codell Producing Y N Commingled OGCC

Perforations Gross Interval: Top	Bottom	No. Holes:	Size:	Open Hole Completion
Reperforated 7206	7216	40	3 1/8" Slick gun	<input type="checkbox"/>

Formation Treatment Describe:
Re-frac Codell w/260,220# 20/40 sd using 123,480 gal of Vistar 22#, 20# & 18# gell.

Test Information	Date: 11/26/99	Hours: 24	Bbls Oil: 50	MCF Gas: 200	Bbls H2O: 5
Production Test Method: flowing	Casing Pressure: 680	Flowing Tubing Pressure: 300	Choke Size 14/64		
API Gravity Oil:	BTU Gas:	Gas Disposition: sold			
Calculated 24 Hr Rate	Bbls Oil: 50	MCF Gas: 200	Bbls H2O: 5	GOR: 4000	
Production Method: flowing					
Tubing Size: 2 3/8	Setting Depth: 7192	Packer Depth: none			
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 Y N Commingled OGCC

Perforations Gross Interval: Top	Bottom	No. Holes:	Size:	Open Hole Completion
				<input type="checkbox"/>

Formation Treatment Describe:

Test Information	Date:	Hours:	Bbls Oil:	MCF Gas:	Bbls H2O:
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 H2O:	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 Shawn Elworthy
Signed [Signature] Title: Field Foreman Date: 01/26/00

SWAFFORD 11-11

PRIMA OIL & GAS

1/26/00
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COGCC

