

FORM

5A

Rev 8/96

## State of Colorado

## Oil and Gas Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

## COMPLETED INTERVAL REPORT



01078694

FOR OGCC USE ONLY

RECEIVED

FEB 26 02

COGCC

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.

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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	X
Address: 1625 Broadway, Suite 2000	No: 303-389-3610	Site Facility Diagram	
City: Denver State: CO Zip: 80202	Fax: 303-595-7411		
API Number: 05-123-15393			
Well Name: Hamilton	Number: 25-13B		
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSW Section 25-T5N-R65W			

FORMATION: CODL (Refrac) Producing Y ☒ N ☐ Commingled ☒ OGCC

Perforations Gross Interval: Top	Bottom	No. Holes:	Size:	Open Hole Completion
7021'	7037'	64	.42"	
Formation Treatment Describe: 132,678 gal Vistar 28/26# Gel & 245,920# 20/40 Ottawa Sand				
Test Information	Date:	Hours:	Bbls Oil:	MCF Gas:
C/N	2/1/02	24	4	184
Production Test Method:	Casing Pressure:	Flowing Tubing Pressure:	Choke Size	
Flowing	400	150	36/64	
API Gravity Oil:	BTU Gas:	Gas Disposition:	Sold	
Calculated 24 Hr Rate	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:	GOR
	4	184	1	46
Production Method: Flowing				
Tubing Size:	Setting Depth:	Packer Depth:		
2-3/8" 4.7#	6982'			
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
Formation Treatment Describe:				
Test Information	Date:	Hours:	Bbls Oil:	MCF Gas:
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 <sub>2</sub> 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:

Title: Regulatory Engineer

Date: 02/15/02