

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:

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Date Received:

### 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: <u>47120</u>	4. Contact Name: <u>Callie Fiddes</u>
2. Name of Operator: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u>	Phone: <u>(720) 929-4361</u>
3. Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	Email: <u>Callie.Fiddes@Anadarko.com</u>

5. API Number <u>05-123-45089-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>NEWBY STATE</u>	Well Number: <u>15N-4HZ</u>
8. Location: QtrQtr: <u>SWSE</u> Section: <u>33</u> Township: <u>3N</u> Range: <u>68W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/03/2018 End Date: 06/14/2018 Date of First Production this formation: 09/24/2018  
Perforations Top: 7696 Bottom: 21121 No. Holes: 236 Hole size: 0.44

Provide a brief summary of the formation treatment: Open Hole:

PERF AND FRAC FROM 7696-21121.

24 BBL 15% HCL ACID, 833 BBL 7.5% HCL ACID, 8,313 BBL PUMP DOWN, 208,930 BBL SLICKWATER, 218,100 TOTAL FLUID, 4,728,090# 40/70 GENOA/SAND HILLS, 4,728,090# TOTAL SAND.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 218100

Max pressure during treatment (psi): 7823

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): 0.85

Total acid used in treatment (bbl): 857

Number of staged intervals: 40

Recycled water used in treatment (bbl): 1460

Flowback volume recovered (bbl): 4085

Fresh water used in treatment (bbl): 215783

Disposition method for flowback: RECYCLE

Total proppant used (lbs): 4728090

Rule 805 green completion techniques were utilized:

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

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

#### Test Information:

Date: 10/22/2018 Hours: 24 Bbl oil: 36 Mcf Gas: 59 Bbl H2O: 10

Calculated 24 hour rate: Bbl oil: 36 Mcf Gas: 59 Bbl H2O: 10 GOR: 1639

Test Method: Flowing Casing PSI: 1050 Tubing PSI: 1200 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1258 API Gravity Oil: 56

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7200 Tbg setting date: 10/22/2018 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 estimated TPZ footages on form 5 should be revised to 2' FNL, 1593' FEL, Sec 4.

Anadarko certifies compliance with rule 317.s.

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

Signed: \_\_\_\_\_ Print Name: Callie Fiddes

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: Callie.Fiddes@Anadarko.com

### Attachment Check List

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

\_\_\_\_\_

Total Attach: 0 Files

**General Comments**

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

Total: 0 comment(s)