

State of Colorado  
Oil and Gas Conservation Commission  
DEPARTMENT OF NATURAL RESOURCES

FOR OGCC USE ONLY  
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	<i>ME</i>		



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 (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.

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	<input checked="" type="checkbox"/>
Address: 1625 Broadway, Suite 2000	No: 303-389-3610	Site Facility Diagram	
City: Denver State: CO Zip: 80202	Fax: 303-595-7411		
API Number: 05-123-14968			
Well Name: Schmier	Number: 32-4 A		
Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNW Section 32-T5N-R64W			

FORMATION: CODL (Refrac) Producing Y  N  Commingled  OGCC

Perforations Gross Interval: Top 6984'	Bottom 6998'	No. Holes: 56	Size:	Open Hole Completion
Formation Treatment Describe: 130,578 gal Vistar 28/26# Gel & 246,120# 20/40 Ottawa Sand				
Test Information C/N	Date: 7/25/02	Hours: 24	Bbls Oil: 5	MCF Gas: 114
Production Test Method: Flowing	Casing Pressure:	Flowing Tubing Pressure: 170	Choke Size: 22/64	Bbls H <sub>2</sub> O: 0
API Gravity Oil:	BTU Gas:	Gas Disposition: Sold		
Calculated 24 Hr Rate	Bbls Oil: 5	MCF Gas: 114	Bbls H <sub>2</sub> O: 0	GOR: 23
Production Method: Flowing				
Tubing Size: 2-3/8" & 2-7/8"	Setting Depth: 6937'	Packer Depth: 6937'		
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 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:	Bbls H <sub>2</sub> O:
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: *[Signature]* Title: Regulatory Engineer Date: 08/08/02