

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:  
402090047

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.

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|---|--|
| 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>05-123-46435-00</u>   | 6. County: <u>WELD</u>     |
| 7. Well Name: <u>GRACIE</u>  | Well Number: <u>24-3HZ</u> |
| 8. Location: QtrQtr: <u>SESW</u> Section: <u>24</u> Township: <u>2N</u> Range: <u>66W</u> Meridian: <u>6</u> |                            |
| 9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>  |                            |

### Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/13/2019 End Date: 05/16/2019 Date of First Production this formation: 06/05/2019  
Perforations Top: 8032 Bottom: 12847 No. Holes: 380 Hole size: 0.44

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

PERF AND FRAC FROM 8032-12847.  
24 BBL 15% HCL ACID, 19 BBL 7.5% HCL ACID, 2,108 BBL PUMP DOWN, 87,485 BBL SLICKWATER, 89,636 TOTAL FLUID, 2,657,330# 40/70 OTTAWA/ST. PETERS, 2,657,330# TOTAL SAND.

This formation is commingled with another formation:  Yes  No  
Total fluid used in treatment (bbl): 89636 Max pressure during treatment (psi): 7771  
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): 0.84  
Total acid used in treatment (bbl): 43 Number of staged intervals: 12  
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 4178  
Fresh water used in treatment (bbl): 89593 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 2657330 Rule 805 green completion techniques were utilized:   
Reason why green completion not utilized:

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

#### Test Information:

Date: 07/08/2019 Hours: 24 Bbl oil: 86 Mcf Gas: 162 Bbl H2O: 26  
Calculated 24 hour rate: Bbl oil: 86 Mcf Gas: 162 Bbl H2O: 26 GOR: 1884  
Test Method: Flowing Casing PSI: 2500 Tubing PSI: 1500 Choke Size: 12/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1266 API Gravity Oil: 47  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7685 Tbg setting date: 07/06/2019 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 5' FSL, 549' FWL, Sec 24.  
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**

**User Group**

**Comment**

**Comment Date**

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|  |  | Stamp Upon Approval |
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Total: 0 comment(s)