

FORM
5A

Rev
09/20

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: 16700

2. Name of Operator: CHEVRON USA INC

3. Address: 100 CHEVRON ROAD

City: RANGELY State: CO Zip: 81648

4. Contact Name: ANITA SANFORD

Phone: (970) 675-3842

Fax:

Email: ATLX@CHEVRON.COM

5. API Number 05-103-07173-00

7. Well Name: M B LARSON

8. Location: QtrQtr: SWSW Section: 25 Township: 2N Range: 102W Meridian: 6

9. Field Name: RANGELY Field Code: 72370

6. County: RIO BLANCO

Well Number: C11 X 25

Completed Interval

FORMATION: WEBER Status: SHUT IN Treatment Type: _____
Treatment Date: _____ End Date: _____ Date this Formation was Completed: _____
Perforations Top: 6118 Bottom: 6513 No. Holes: 34 Hole size: 1/2 Open Hole: ☐

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

Our RWSU well Larson MB C 11X25 was intended for remedial surface casing work, but when we rigged up and attempted to set production casing plugs to establish a baseline for casing testing (isolating surface casing issues), mechanical integrity issues with the production casing were detected, and a good casing test was not able to be acquired. We have decided to plug and abandon this well. Currently, the well is isolated with a plug set at 6019'.

Pending the approval of a Form 6 we intend to execute the plug and abandon (P&A) job around July 13th, 2021.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____
Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____
Total acid used in treatment (bbl): _____ Number of staged intervals: _____
Recycled or Reused Fluids used in treatment (bbl): _____ Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____
Total proppant used (lbs): _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____
Date: _____ Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____
Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____
Tubing Size: 2 + 7/8 Tubing Setting Depth: 60 Tbg setting date: 04/29/2021 Packer Depth: _____

Reason for Non-Production: Well will be P&A'ed.

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:

For questions regarding the well please contact Peter Lacobie -Chevron Production Engineer at (432) 202-8588 email: pelh@chevron.com

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

Signed: _____ Print Name: ANITA SANFORD
Title: REGULATORY TECH.ASSISTANT Date: _____ Email: ATLX@CHEVRON.COM

Attachment List

Att Doc Num Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)