

FORM
5A

Rev
09/20

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:
403497067

Date Received:
08/15/2023

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. ECMC Operator Number: <u>47120</u>	4. Contact Name: <u>Christina Hirtler</u>
2. Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6301</u>
3. Address: <u>P O BOX 173779</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	Email: <u>christina_hirtler@oxy.com</u>

5. API Number <u>05-123-51934-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>BLUE CHIP</u>	Well Number: <u>22-11HZ</u>
8. Location: QtrQtr: <u>SENW</u> Section: <u>22</u> Township: <u>5N</u> Range: <u>67W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: SHUT IN Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 07/03/2023 End Date: 07/22/2023 Date this Formation was Completed:

Perforations Top: 8440 Bottom: 22373 No. Holes: 1593 Hole size: 0.39 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.

633 BBL 15% HCL ACID; 876 BBL 20% HCR-7000 WL ACID; 405 BBL 7.5% HCL ACID; 36,152 BBL PUMP DOWN; 637,516 BBL SLICKWATER; 675,582 BBL TOTAL FLUID; 167,200 LBS 100 MESH GENOA/SAND HILLS; 20,583,424 LBS WHITE 40/70 OTTAWA/ST. PETERS; 20,750,624 LBS TOTAL PROPPANT.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): 7946

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): 0.94

Total acid used in treatment (bbl): 1914 Number of staged intervals: 52

Recycled or Reused Fluids used in treatment (bbl): 3900 Flowback volume recovered (bbl): _____

Recycled Produced Water Alternative used in treatment (bbls): _____

Fresh water used in treatment (bbl): 669768 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 20750624

Fracture stimulations must be reported on FracFocus.org

Test Information:

Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

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: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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 was immediately shut in after frac and therefore does not have a date of first production, flowback volumes or test data yet. Another 5A will be submitted when the well is turned on to production.

The estimated TPZ footages on the Form 5 should be revised to 631' FSL / 1592' FEL

Kerr-McGee certifies compliance with Rule 408.u.

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

Signed: _____ Print Name: Christina Hirtler

Title: Regulatory Date: 8/15/2023 Email: christina_hirtler@oxy.com

ATTACHMENT LIST

Att Doc Num	Name
403497067	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Per operator concurrence added the TPZ line call out comment in Submit Tab comment box and added missing Total fluid used in treatment (bbl) value Permitting review complete	02/24/2026
Permit	Emailed operator about TPZ verification and corrected value of Total fluid used in treatment (bbl)	02/04/2026

Total: 2 comment(s)