

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 47120
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
3. Address: P O BOX 173779 City: DENVER State: CO Zip: 80217-
4. Contact Name: Cindy Vue Phone: (720) 929-6832 Fax: (720) 929-7832

5. API Number 05-123-25002-00
6. County: WELD
7. Well Name: MAYER Well Number: 31-15
8. Location: QtrQtr: NWNW Section: 15 Township: 3N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type:

Treatment Date: 03/02/2012 End Date: Date of First Production this formation: 05/15/2008

Perforations Top: 7193 Bottom: 7208 No. Holes: 60 Hole size: 0.38

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

CD PERF 7193-7208 HOLES 60 SIZE 0.38 Refrac CODL down 4.5" casing w/ 204,666 gal slickwater. No proppant used on this job. Broke @ 2,796 psi @ 3.1 bpm. ATP=5,149 psi; MTP=5,618 psi; ATR=55.3 bpm; ISDP=2,780 psi

This formation is commingled with another formation: [X] 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: Number of staged intervals:

Total acid used in treatment (bbl): Max frac gradient (psi/ft):

Recycled water used in treatment (bbl): Flowback volume recovered (bbl):

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

Total proppant used (lbs): Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 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:

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: \_\_\_\_\_

Treatment Date: 03/02/2012 End Date: \_\_\_\_\_ Date of First Production this formation: 03/08/2012

Perforations Top: 6938 Bottom: 7208 No. Holes: 132 Hole size: 0.42

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

NB PERF 6938-7076 HOLES 72 SIZE 0.42  
CD PERF 7193-7208 HOLES 60 SIZE 0.38

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: \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): \_\_\_\_\_ Rule 805 green completion techniques were utilized:

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

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

**Test Information:**

Date: 03/22/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 17 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 17 Bbl H2O: 0 GOR: 17000

Test Method: FLOWING Casing PSI: 1200 Tubing PSI: 1200 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1332 API Gravity Oil: 53

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7164 Tbg setting date: 03/15/2012 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: \_\_\_\_\_

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: \_\_\_\_\_

Treatment Date: 03/02/2012 End Date: \_\_\_\_\_ Date of First Production this formation: 03/08/2012

Perforations Top: 6938 Bottom: 7076 No. Holes: 72 Hole size: 0.42

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

NB PERF 6938-7076 HOLES 72 SIZE 0.42  
Frac NBRR down 4.5" casing w/ 252 gal 15% HCl & 246,330 gal slickwater. No proppant used on this job.  
Broke @ 3,225 psi @ 2.9 bpm. ATP=5,090 psi; MTP=5,645 psi; ATR=59.3 bpm; ISDP=3,527 psi

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: \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): \_\_\_\_\_ Rule 805 green completion techniques were utilized:

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

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

**Test Information:**

Date: \_\_\_\_\_ 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: \_\_\_\_\_

Comment: \_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: Cindy Vue

Title: Regulatory Analyst II Date: 4/10/2012 Email: Cindy.Vue@anadarko.com

**Attachment Check List**

Att Doc Num	Name
400270407	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

User Group	Comment	Comment Date

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