

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:

400720726

Date Received:

02/05/2015

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: 46685
2. Name of Operator: KINDER MORGAN CO2 CO LP
3. Address: 17801 HWY 491
City: CORTEZ State: CO Zip: 81321
4. Contact Name: Paul Belanger
Phone: (970) 882-2464
Fax: (970) 88-5221
Email: Paul_Belanger@KinderMorgan.com

5. API Number 05-083-06649-04
6. County: MONTEZUMA
7. Well Name: Goodman Point
Well Number: 16
8. Location: QtrQtr: NWNW Section: 33 Township: 37N Range: 17W Meridian: N
9. Field Name: MCELMO Field Code: 53674

Completed Interval

FORMATION: LEADVILLE Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation:

Perforations Top: 7915 Bottom: 8877 No. Holes: Hole size:

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

No treatment of this borehole.

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 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: 10/17/2014 Hours: 16 Bbl oil: 0 Mcf Gas: 13343 Bbl H2O: 67

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 19364 Bbl H2O: 97 GOR: 0

Test Method: flowing Casing PSI: 636 Tubing PSI: Choke Size:

Gas Disposition: SOLD Gas Type: CO2 Btu Gas: 0 API Gravity Oil: 0

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:

Non-flammable CO2 gas produced and thus green completion per rule 805 (3) does not apply.
Any production gets reported to a unit-designated well YC4 API 05-083-06584.
WBD not attached here since the latest one was just attached to the F5, docnum 400720724

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

Signed: _____ Print Name: Paul E. Belanger
Title: Regulatory Contractor Date: 2/5/2015 Email Paul_Belanger@KinderMorgan.com
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Attachment Check List

Att Doc Num **Name**

400720726	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

Permit	The date used by our production department will be 10/17/2014 (date of the test). If you transported gas from the location than you need a form 10. When you report form 7's add all production sold even if its shut in immediately after.	2/10/2015 6:41:19 AM
Permit	Misssing date of first production.	2/9/2015 8:47:41 AM

Total: 2 comment(s)