

FORM
5A
Rev
02/08

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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COMPLETED INTERVAL REPORT

Document Number:
1637978

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, reoperation 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: 80217-37
4. Contact Name: MICHAEL NAGEL
Phone: (720) 929-6000
Fax: (720) 929-7461

5. API Number 05-123-30407-00
6. County: WELD
7. Well Name: PIONEER
Well Number: 37-2
8. Location: QtrQtr: SESE Section: 2 Township: 2N Range: 65W Meridian: 6

Completed Interval

FORMATION: NIOBRARA-CODELL Status: N/A
Treatment Date: 01/14/2010 Date of First Production this formation: 01/14/2010
Perforations Top: 6940 Bottom: 7192 No. Holes: 68 Hole size: 37/100
Provide a brief summary of the formation treatment: Open Hole:
500 GALS ACID AND 439105 GALS FLUID AND 345840 LBS 40/70 SAND AND 4000 LBS 20/40 SB EXCEL. PERF NIO: 6940-7054, 36 TOTAL HOLES @ 0.37. PERF CODELL: 7176-7192, 32 TOTAL HOLES @ 0.375.
This formation is commingled with another formation: Yes No
Test Information:
Date: 02/09/2010 Hours: 24 Bbls oil: 54 Mcf Gas: 250 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 54 Mcf Gas: 250 Bbls H2O: 0 GOR: 4630
Test Method: FLOWING Casing PSI: 900 Tubing PSI: Choke Size: 0.21875
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1242 API Gravity Oil: 51
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:

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

Signed: _____ Print Name: MICHAEL NAGEL
Title: REG ANALYST II Date: 2/10/2010 Email: MICHAEL.NAGEL@ANADARKO.COM

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved:

David S. Nestor

Director of COGCC

Date: 6/21/2010

Attachment Check List

Att Doc Num	Name	Doc Description
1637978	FORM 5A SUBMITTED	LF@2480856 1637978

Total Attach: 1 Files