

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

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: 100264  
2. Name of Operator: XTO ENERGY INC  
3. Address: 382 CR 3100  
City: AZTEC State: NM Zip: 87410  
4. Contact Name: Wanett McCauley  
Phone: (505) 333-3630  
Fax: (505) 333-3284

5. API Number 05-071-07424-00  
6. County: LAS ANIMAS  
7. Well Name: HILL RANCH  
Well Number: 03-12V  
8. Location: QtrQtr: NWSW Section: 3 Township: 35S Range: 67W Meridian: 6

Completed Interval

FORMATION: RATON-VERMEJO COALS Status: PRODUCING  
Treatment Date: Date of First Production this formation: 08/05/2010  
Perforations Top: 602 Bottom: 2391 No. Holes: 220 Hole size: 0.51  
Provide a brief summary of the formation treatment: Open Hole:   
This formation is commingled with another formation:  Yes  No  
Test Information:  
Date: 08/06/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 182 Bbls H2O: 84  
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 182 Bbls H2O: 84 GOR: 0  
Test Method: Pumping Casing PSI: 4 Tubing PSI: 1 Choke Size:  
Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 1002 API Gravity Oil:  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 2450 Tbg setting date: 07/30/2010 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: RATON COAL Status: COMMINGLED

Treatment Date: 07/20/2010 Date of First Production this formation: 08/05/2010

Perforations Top: 602 Bottom: 1469 No. Holes: 88 Hole size: 0.45

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

Acidized w/4,400 gals 15% HCl acid. Frac'd w/211,510 gals 20# Delta 140 w/Sandwedge OS carrying 27,249# 16/30 Brady sd & 438,063# 12/20 Brady sd.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls 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: Wanett McCauley

Title: Reg Compliance Technician Date: \_\_\_\_\_ Email wanett\_mccauley@xtoenergy.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: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_