

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:

400085765

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: 28600  
2. Name of Operator: EXXON MOBIL CORPORATION  
3. Address: P O BOX 4358  
City: HOUSTON State: TX Zip: 77210-43  
4. Contact Name: Beatrice Sabala  
Phone: (281) 654-2685  
Fax: (281) 654-1940

5. API Number 05-103-11100-00  
6. County: RIO BLANCO  
7. Well Name: FREEDOM UNIT  
Well Number: 197-33A4  
8. Location: QtrQtr: SWSE Section: 33 Township: 1S Range: 97W Meridian: 6

Completed Interval

FORMATION: COZZETTE Status: PRODUCING

Treatment Date: 06/22/2010 Date of First Production this formation: 07/04/2010

Perforations Top: 11677 Bottom: 11801 No. Holes: 36 Hole size: 0.28

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

Frac w/ 11,700# 100, 58,800# 40/70 mesh proppant.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 07/04/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 160 Bbls H2O: 143 GOR: 0

Test Method: Flowing Casing PSI: 2617 Tubing PSI:          Choke Size: 25/64

Gas Disposition: SOLD Gas Type: WET 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: CORCORAN Status: PRODUCING

Treatment Date: 06/22/2010 Date of First Production this formation: 07/04/2010

Perforations Top: 11905 Bottom: 12314 No. Holes: 84 Hole size: 0.28

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

Frac w/ 36,100# 100, 180,500# 40/70 mesh proppant.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 07/04/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 310 Bbls H2O: 277 GOR: 0

Test Method: Flowing Casing PSI: 2617 Tubing PSI: \_\_\_\_\_ Choke Size: 25/64

Gas Disposition: SOLD Gas Type: WET 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: WILLIAMS FORK Status: PRODUCING

Treatment Date: 07/06/2010 Date of First Production this formation: 07/04/2010

Perforations Top: 9126 Bottom: 11316 No. Holes: 384 Hole size: 0.28

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

Frac w/ 175,500# 100, 878,700# 40/70 mesh proppant. Set frac plugs at 9,733, 10,610, 11,184, 11,188. All plugs drilled out.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 07/04/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 1998 Bbls H2O: 1782 GOR: 0

Test Method: Flowing Casing PSI: 2617 Tubing PSI: \_\_\_\_\_ Choke Size: 25/64

Gas Disposition: SOLD Gas Type: WET 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: Beatrice Sabala

Title: Technical Asst.

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

Email beatrice.sabala@exxonmobil.com

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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: \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name	Doc Description
400085775		FRU 197-33A4_Wellbore Schematic_0810.pdf

Total Attach: 1 Files