



FORMATION: NIORARA-CODELL Status: PRODUCING

Treatment Date: 02/05/2010 Date of First Production this formation: 10/24/2010

Perforations Top: 7168 Bottom: 7450 No. Holes: 78 Hole size: 0.42

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

NBRR Perf 7168-7300 Holes 42 Size 0.42 CODL Perf 742-7450 Holes 36 Size 0.42  
Frac NBRR w/ 168,071 gal pHaser & 250,060# 20/40 sand & 4,000# 20/40 SB Excel.  
Frac CODL w/ 130,494 gal pHaser & 220,300# 20/40 sand & 4,000# 20/40 SB Excel.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 10/12/2010 Hours: 24 Bbls oil: 162 Mcf Gas: 451 Bbls H2O: 0

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 162 Mcf Gas: 451 Bbls H2O: 0 GOR: 2784

Test Method: FLOWING Casing PSI: 1000 Tubing PSI: \_\_\_\_\_ Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1141 API Gravity Oil: 45

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: \_\_\_\_\_ Email Cindy.Vue@anadarko.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_