

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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DE ET OE ES

COMPLETED INTERVAL REPORT

Document Number:

400128474

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 05-103-10957-00
6. County: RIO BLANCO
7. Well Name: FEDERAL Well Number: 2S-95-16-33DP
8. Location: QtrQtr: NWSE Section: 16 Township: 2S Range: 95W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING
Treatment Date: 01/27/2009 Date of First Production this formation: 02/03/2009
Perforations Top: 11360 Bottom: 14389 No. Holes: 236 Hole size: 35/100
Provide a brief summary of the formation treatment: Open Hole:
Acidized w/10,584 gals 15% HCl acid. Frac'd w/2,016,462 gals 20# Linear Gel carrying 219,420# 30/60 SinterLite sd & 731,094# Tempered HS sd, 40/70 proppant.
This formation is commingled with another formation: Yes No
Test Information:
Date: 03/01/2009 Hours: 24 Bbls oil: 38 Mcf Gas: 1578 Bbls H2O: 312
Calculated 24 hour rate: Bbls oil: 38 Mcf Gas: 1578 Bbls H2O: 312 GOR:
Test Method: Flowing Casing PSI: 2210 Tubing PSI: Choke Size: 12/64
Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 1163 API Gravity Oil:
Tubing Size: 2 + 3/8 Tubing Setting Depth: 11334 Tbg setting date: 07/24/2009 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: This is a revised Form 5A to change the completed interval formation from Mesaverde to Williams Fork.

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 Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)