

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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Document Number:

400129093

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: 47120 4. Contact Name: Cindy Vue
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6832
3. Address: P O BOX 173779 Fax: (720) 929-7832
City: DENVER State: CO Zip: 80217-37

5. API Number 05-123-32120-00 6. County: WELD
7. Well Name: RIVERBEND Well Number: 22-18
8. Location: QtrQtr: SWSW Section: 18 Township: 1N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: <u>J SAND</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>12/10/2010</u>		Date of First Production this formation: <u>01/19/2011</u>	
Perforations	Top: <u>8286</u>	Bottom: <u>8316</u>	No. Holes: <u>60</u> Hole size: <u>0.38</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
<u>Frac J-Sand down 4-1/2" Csg w/ 148,260 gal Slickwater w/ 116,060# 40/70, 4,000# SB Excel.</u>			
This formation is commingled with another formation:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Test Information:			
Date: <u>01/28/2011</u>	Hours: <u>24</u>	Bbls oil: <u>25</u>	Mcf Gas: <u>26</u> Bbls H2O: <u>0</u>
Calculated 24 hour rate:		Bbls oil: <u>25</u>	Mcf Gas: <u>26</u> Bbls H2O: <u>0</u> GOR: <u>1040</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>820</u>	Tubing PSI: <u></u>	Choke Size: <u>14/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	BTU Gas: <u>1264</u>	API Gravity Oil: <u>56</u>
Tubing Size: <u></u>	Tubing Setting Depth: <u></u>	Tbg setting date: <u></u>	Packer Depth: <u></u>
Reason for Non-Production: <u></u>			
Date formation Abandoned: <u></u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u></u>
Bridge Plug Depth: <u></u>		Sacks cement on top: <u></u>	

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 12/14/2010 Date of First Production this formation: 01/19/2011

Perforations Top: 7606 Bottom: 7854 No. Holes: 120 Hole size: 0.42

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

NB Perf 7606-7692 Holes 66 Size 0.47 CD Perf 7836-7854 Holes 54 Size 0.42
Frac Niobrara B & C down 4-1/2" Csg w/ 250 gal 15% HCl & 245,912 gal Slickwater w/ 200,540# 40/70, 4,000# SB Excel
Frac Codell down 4-1/2" Csg w/ 203,238 gal Slickwater w/ 150,940# 40/70, 4,000# SB Excel

This formation is commingled with another formation: ☒ Yes ☐ No

Test Information:

Date: 01/28/2011 Hours: 24 Bbls oil: 25 Mcf Gas: 26 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: 25 Mcf Gas: 26 Bbls H2O: 0 GOR: 1040

Test Method: FLOWING Casing PSI: 820 Tubing PSI: _____ Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1264 API Gravity Oil: 56

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: 1/31/2011 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: David G. Neslin Director of COGCC Date: 2/3/2011

Attachment Check List

Att Doc Num	Name
400129093	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)