

<b>FORM 5A</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>COMPLETED INTERVAL REPORT</b>			Document Number:  <div style="text-align: center; font-weight: bold;">2590551</div>				

1. OGCC Operator Number: <u>16700</u>	4. Contact Name: <u>JULIE JUSTUS</u>
2. Name of Operator: <u>CHEVRON USA INC</u>	Phone: <u>(970) 257-6042</u>
3. Address: <u>6001 BOLLINGER CANYON RD</u>	Fax: <u>(970) 245-6489</u>
City: <u>SAN RAMON</u> State: <u>CA</u> Zip: <u>94583</u>	

5. API Number <u>05-045-16257-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>SKR</u>	Well Number: <u>598-25-CV-02</u>
8. Location: QtrQtr: <u>SESW</u> Section: <u>25</u> Township: <u>5S</u> Range: <u>98W</u> Meridian: <u>6</u>	
9. Field Name: <u>SKINNER RIDGE</u> Field Code: <u>77548</u>	

<u>Completed Interval</u>	
FORMATION: <u>WILLIAMS FORK</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>08/23/2010</u>	Date of First Production this formation: <u>09/13/2010</u>
Perforations Top: <u>4163</u> Bottom: <u>6107</u>	No. Holes: <u>216</u> Hole size: <u>7/20</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
<u>1,540,098 GALS SLURRY PUMPED WITH 914,530 LBS SAND</u>	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Test Information:</b>	
Date: <u>09/15/2010</u> Hours: <u>24</u> Bbls oil: <u>0</u> Mcf Gas: <u>422</u> Bbls H2O: <u>301</u>	
Calculated 24 hour rate:	Bbls oil: <u>0</u> Mcf Gas: <u>422</u> Bbls H2O: <u>301</u> GOR: _____
Test Method: <u>FLOWING</u> Casing PSI: <u>810</u> Tubing PSI: <u>300</u> Choke Size: <u>32/64</u>	
Gas Disposition: <u>SOLD</u> Gas Type: <u>DRY</u> BTU Gas: <u>1086</u> API Gravity Oil: _____	
Tubing Size: <u>2 + 3/8</u> Tubing Setting Depth: <u>5483</u> Tbg setting date: <u>09/13/2010</u> Packer Depth: _____	
Reason for Non-Production:	
<u>NA</u>	
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: JULIE JUSTUS

Title: REGULATORY SPECIALIST Date: 10/27/2010 Email: JJUSTUS@CHEVRON.COM

**Attachment Check List**

Att Doc Num	Name
2590551	FORM 5A SUBMITTED
2590552	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

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

Total: 0 comment(s)