


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		<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> Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center;">1633176</div>	DE	ET	OE	ES				
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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.											
<table style="width: 100%;"> <tr> <td style="width: 50%;">1. OGCC Operator Number: <u>16700</u></td> <td style="width: 50%;">4. Contact Name: <u>JULIE JUSTUS</u></td> </tr> <tr> <td>2. Name of Operator: <u>CHEVRON USA INC</u></td> <td>Phone: <u>(970) 257-6042</u></td> </tr> <tr> <td>3. Address: <u>6001 BOLLINGER CANYON RD</u></td> <td>Fax: <u>(970) 245-6489</u></td> </tr> <tr> <td>City: <u>SAN RAMON</u> State: <u>CA</u> Zip: <u>94583</u></td> <td></td> </tr> </table>				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>	
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<table style="width: 100%;"> <tr> <td style="width: 20%;">Perforations</td> <td style="width: 20%;">Top: <u>6238</u></td> <td style="width: 20%;">Bottom: <u>6396</u></td> <td style="width: 20%;">No. Holes: <u>21</u></td> <td style="width: 20%;">Hole size: <u>35/100</u></td> </tr> </table>				Perforations	Top: <u>6238</u>	Bottom: <u>6396</u>	No. Holes: <u>21</u>	Hole size: <u>35/100</u>			
Perforations	Top: <u>6238</u>	Bottom: <u>6396</u>	No. Holes: <u>21</u>	Hole size: <u>35/100</u>							
Provide a brief summary of the formation treatment: _____ Open Hole: <input type="checkbox"/>											
<div style="border: 1px solid black; padding: 5px;">139776 GALS SLURRY PUMPED WITH 97951 LBS SAND</div>											
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
Test Information:											
<table style="width: 100%;"> <tr> <td>Date: _____</td> <td>Hours: _____</td> <td>Bbls oil: _____</td> <td>Mcf Gas: _____</td> <td>Bbls H2O: _____</td> </tr> </table>				Date: _____	Hours: _____	Bbls oil: _____	Mcf Gas: _____	Bbls H2O: _____			
Date: _____	Hours: _____	Bbls oil: _____	Mcf Gas: _____	Bbls H2O: _____							
<table style="width: 100%;"> <tr> <td>Calculated 24 hour rate: _____</td> <td>Bbls oil: _____</td> <td>Mcf Gas: _____</td> <td>Bbls H2O: _____</td> <td>GOR: _____</td> </tr> </table>				Calculated 24 hour rate: _____	Bbls oil: _____	Mcf Gas: _____	Bbls H2O: _____	GOR: _____			
Calculated 24 hour rate: _____	Bbls oil: _____	Mcf Gas: _____	Bbls H2O: _____	GOR: _____							
<table style="width: 100%;"> <tr> <td>Test Method: _____</td> <td>Casing PSI: _____</td> <td>Tubing PSI: _____</td> <td>Choke Size: _____</td> </tr> </table>				Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____				
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<table style="width: 100%;"> <tr> <td>Gas Disposition: _____</td> <td>Gas Type: _____</td> <td>BTU Gas: _____</td> <td>API Gravity Oil: _____</td> </tr> </table>				Gas Disposition: _____	Gas Type: _____	BTU Gas: _____	API Gravity Oil: _____				
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<table style="width: 100%;"> <tr> <td>Tubing Size: _____</td> <td>Tubing Setting Depth: _____</td> <td>Tbg setting date: _____</td> <td>Packer Depth: _____</td> </tr> </table>				Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____				
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Reason for Non-Production:											
<div style="border: 1px solid black; padding: 5px;"> MISSED PERFRATION (OFF DEPTH), ABONDON DUE TO HIGH WATER CUT. (Add note) Set Cast Iron Cement Retainer at 6220 but were unable to pump cement through Retainer. Set 1 barrel cement plug above retainer. PBDT is now 6155'. See cement and wireline summaries attached to doc # 2054838 dated 1/10/2011. </div>											
Date formation Abandoned: <u>12/13/2010</u> Squeeze: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, number of sacks cmt _____											
Bridge Plug Depth: <u>6216</u> Sacks cement on top: <u>5</u>											

FORMATION: <u>WILLIAMS FORK</u>			Status: <u>PRODUCING</u>		
Treatment Date: <u>08/23/2010</u>		Date of First Production this formation: <u>12/17/2010</u>			
Perforations	Top: <u>4221</u>	Bottom: <u>5925</u>	No. Holes: <u>168</u>	Hole size: <u>35/100</u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
1335684 GALS SLURRY PUMPED WITH 816197 LBS SAND.					
(This is Williams Fork completion information.)					
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Test Information:					
Date: <u>12/20/2010</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>870</u>	Bbls H2O: <u>279</u>	
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>870</u>	Bbls H2O: <u>279</u>	GOR: <u> </u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>780</u>	Tubing PSI: <u>360</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: <u>0</u>		
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>5192</u>	Tbg setting date: <u>12/15/2010</u>	Packer Depth: <u> </u>		
Reason for Non-Production:					
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>			

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Att Doc Num	Name
1633176	FORM 5A SUBMITTED
1633177	WELLBORE DIAGRAM

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