

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:

400146120

**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 05-123-31535-00 6. County: WELD  
7. Well Name: COTTONWOOD Well Number: 15-33  
8. Location: QtrQtr: SWSE Section: 33 Township: 2N Range: 66W Meridian: 6  
9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

Completed Interval

FORMATION: NIOBARRA-CODELL Status: PRODUCING

Treatment Date: 01/21/2011 Date of First Production this formation: 03/02/2011  
Perforations Top: 7262 Bottom: 7514 No. Holes: 120 Hole size: 0.38

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

NB PERF 7262-7357 HOLES 60 SIZE 0.42 CD PERF 7494-7514 HOLES 60 SIZE 0.38  
Frac Niobrara B & C down 4-1/2" Csg w/ 252 gal 15% HCl & 247,128 gal Slickwater w/ 201,180# 40/70, 4,000# SB Excel  
Frac Codell down 4-1/2" Csg w/ 199,794 gal Slickwater w/ 151,800# 40/70, 4,000# SB Excel

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

**Test Information:**

Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_ GOR: \_\_\_\_\_  
Test Method: \_\_\_\_\_ Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_  
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: \_\_\_\_\_

FORMATION: <u>  NIOBRARA-CODELL-SUSSEX  </u>				Status: <u>  COMMINGLED  </u>	
Treatment Date: <u>  01/21/2011  </u>		Date of First Production this formation: <u>  03/02/2011  </u>			
Perforations	Top: <u>  4648  </u>	Bottom: <u>  7514  </u>	No. Holes: <u>  180  </u>	Hole size: <u>  0.38  </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
SX PERF 4648-4756 HOLE 60 SIZE 0.38 NB PERF 7262-7357 HOLES 60 SIZE 0.42 CD PERF 7494-7514 HOLES 60 SIZE 0.38					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>  03/22/2011  </u>	Hours: <u>  24  </u>	Bbls oil: <u>  65  </u>	Mcf Gas: <u>  142  </u>	Bbls H2O: <u>  0  </u>	
Calculated 24 hour rate:		Bbls oil: <u>  65  </u>	Mcf Gas: <u>  142  </u>	Bbls H2O: <u>  0  </u>	GOR: <u>  2185  </u>
Test Method: <u>  FLOWING  </u>	Casing PSI: <u>  1061  </u>	Tubing PSI: <u>  1031  </u>	Choke Size: <u>  22/64  </u>		
Gas Disposition: <u>  SOLD  </u>	Gas Type: <u>  WET  </u>	BTU Gas: <u>  1186  </u>	API Gravity Oil: <u>  48  </u>		
Tubing Size: <u>          </u>	Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>		
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
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: <u>  SUSSEX  </u>				Status: <u>  PRODUCING  </u>	
Treatment Date: <u>  02/02/2011  </u>		Date of First Production this formation: <u>  03/02/2011  </u>			
Perforations	Top: <u>  4648  </u>	Bottom: <u>  4756  </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"/>		
Frac Sussex down 4-1/2" Csg w/ 18,564 gal Lightning N2 w/ 180,840# 16/30, 20,640# SB Excel					
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Test Information:</b>					
Date: <u>          </u>	Hours: <u>          </u>	Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	
Calculated 24 hour rate:		Bbls oil: <u>          </u>	Mcf Gas: <u>          </u>	Bbls H2O: <u>          </u>	GOR: <u>          </u>
Test Method: <u>          </u>	Casing PSI: <u>          </u>	Tubing PSI: <u>          </u>	Choke Size: <u>          </u>		
Gas Disposition: <u>          </u>	Gas Type: <u>          </u>	BTU Gas: <u>          </u>	API Gravity Oil: <u>          </u>		
Tubing Size: <u>          </u>	Tubing Setting Depth: <u>          </u>	Tbg setting date: <u>          </u>	Packer Depth: <u>          </u>		
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
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>			

Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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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

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### **Attachment Check List**

Att Doc Num	Name

Total Attach: 0 Files

### **General Comments**

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

Total: 0 comment(s)