

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 with columns 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.

1. OGCC Operator Number: 47120 4. Contact Name: CARA MAHLER 2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6029 3. Address: P O BOX 173779 City: DENVER State: CO Zip: 80217-37 Fax: (720) 929-7029

5. API Number 05-123-09895-00 6. County: WELD 7. Well Name: UPRR 38 PAN AM GAS UNIT "K Well Number: 1 8. Location: QtrQtr: NWNE Section: 9 Township: 2N Range: 65W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED Treatment Date: 01/13/2011 Date of First Production this formation: 01/21/2011 Perforations Top: 6973 Bottom: 7724 No. Holes: 299 Hole size: 0.45 Provide a brief summary of the formation treatment: Open Hole: [] NB PERF 6973-7080 HOLES 104 SIZE .44 CD PERF 7215-7230 HOLES 43 SIZE .45 JSND PERF 7676-7724 HOLES 152 / SAND PLUG REMOVED 1/13/2011 This formation is commingled with another formation: [] Yes [X] 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:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: J SAND Status: PRODUCING

Treatment Date: 01/13/2011 Date of First Production this formation: 01/21/2011

Perforations Top: 7676 Bottom: 7724 No. Holes: 152 Hole size: _____

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

Cleanout 127' to 7772' w/246jts. Circ clean.
REMOVE SAND PLUG @ 7600' TO COMMINGLE WITH NB/CD

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/18/2011 Hours: 24 Bbls oil: 2 Mcf Gas: 10 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 2 Mcf Gas: 10 Bbls H2O: 0 GOR: 5000

Test Method: FLOWING Casing PSI: 499 Tubing PSI: 424 Choke Size: _____

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1185 API Gravity Oil: 56

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7657 Tbg setting date: 01/13/2011 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: CARA MAHLER

Title: REGULATORY ANALYST 1 Date: 2/22/2011 Email CARA.MAHLER@ANADARKO.COM

Attachment Check List

Att Doc Num	Name
400135825	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)