

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 4 columns: DE, ET, OE, ES

Document Number: 400146646

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 City: DENVER State: CO Zip: 80217-37 Fax: (720) 929-7832

5. API Number 05-123-21284-00 6. County: WELD
7. Well Name: MCCORMICK Well Number: 9-1
8. Location: QtrQtr: NESE Section: 1 Township: 3N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-CODELL Status: COMMINGLED
Treatment Date: 02/23/2011 Date of First Production this formation: 02/24/2011
Perforations Top: 7292 Bottom: 7788 No. Holes: 116 Hole size: 0.38
Provide a brief summary of the formation treatment: Open Hole: [ ]
CLEANED OUT SAND ABOVE J SAND AND COMMINGLED CODELL AND J SAND PRODUCTION.
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 03/22/2011 Hours: 24 Bbls oil: 4 Mcf Gas: 202 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 4 Mcf Gas: 202 Bbls H2O: 0 GOR: 50500
Test Method: FLOWING Casing PSI: 575 Tubing PSI: 553 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1253 API Gravity Oil: 62
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7713 Tbg setting date: 02/18/2011 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:

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

FORMATION: J SAND Status: PRODUCING

Treatment Date: 02/23/2011 Date of First Production this formation: 05/07/2003

Perforations Top: 7756 Bottom: 7788 No. Holes: 60 Hole size: 0.34

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

CLEANED OUT SAND TO 7860 TO COMMINGLE WELL WITH CODELL FORMATION 2/23/2011.  
COMMINGLED J SAND AND CODELL ON 2/24/2011.

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: \_\_\_\_\_

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: 3/25/2011 Email Cindy.Vue@anadarko.com

**Attachment Check List**

Att Doc Num	Name
400146646	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)