


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="text-align: center; font-weight: bold;">400162201</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>47120</u></td> <td style="width: 50%;">4. Contact Name: <u>CARA MAHLER</u></td> </tr> <tr> <td>2. Name of Operator: <u>KERR-MCGEE OIL & GAS ONSHORE LP</u></td> <td>Phone: <u>(720) 929-6029</u></td> </tr> <tr> <td>3. Address: <u>P O BOX 173779</u></td> <td>Fax: <u>(720) 929-7029</u></td> </tr> <tr> <td>City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-37</u></td> <td></td> </tr> </table>				1. OGCC Operator Number: <u>47120</u>	4. Contact Name: <u>CARA MAHLER</u>	2. Name of Operator: <u>KERR-MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6029</u>	3. Address: <u>P O BOX 173779</u>	Fax: <u>(720) 929-7029</u>	City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-37</u>	
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<table style="width: 100%;"> <tr> <td style="width: 20%;">Perforations</td> <td style="width: 20%;">Top: <u>7874</u></td> <td style="width: 20%;">Bottom: <u>7932</u></td> <td style="width: 20%;">No. Holes: <u>98</u></td> <td style="width: 20%;">Hole size: <u>0.38</u></td> </tr> </table>				Perforations	Top: <u>7874</u>	Bottom: <u>7932</u>	No. Holes: <u>98</u>	Hole size: <u>0.38</u>			
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Provide a brief summary of the formation treatment: Open Hole: <input type="checkbox"/>											
<div style="border: 1px solid black; padding: 2px;">SAND PLUG SET @ 7963'</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: _____			
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<table style="width: 100%;"> <tr> <td>Test Method: _____</td> <td>Casing PSI: _____</td> <td>Tubing PSI: _____</td> <td>Choke Size: <u>18/64</u></td> </tr> </table>				Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: <u>18/64</u>				
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Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____								
Reason for Non-Production:											
<div style="border: 1px solid black; padding: 2px;">SAND PLUG SET @ 7963'</div>											
Date formation Abandoned: <u>03/29/2011</u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____											
Bridge Plug Depth: <u>7963</u> Sacks cement on top: _____											

FORMATION: <u> NIOBRARA-CODELL </u>						Status: <u> PRODUCING </u>
Treatment Date: <u> 04/13/2011 </u>			Date of First Production this formation: <u> 04/19/2011 </u>			
Perforations	Top: <u> 7160 </u>	Bottom: <u> 7427 </u>	No. Holes: <u> 167 </u>	Hole size:	<u> 0.38 </u>	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>			
<div style="border: 1px solid black; padding: 5px;"> REPERF CDL (3/31/2011) 7410-7427 HOLES 51 SIZE .38 Re-Frac Codell down 4-1/2" Csg w/ 202,138 gal Slickwater w/ 150,600# 30/50, 4,000# SuperLC, 0# . </div>						
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Test Information:						
Date: <u> 05/01/2011 </u>	Hours: <u> 24 </u>	Bbls oil: <u> 22 </u>	Mcf Gas: <u> 394 </u>	Bbls H ₂ O: <u> 0 </u>		
Calculated 24 hour rate:		Bbls oil: <u> 22 </u>	Mcf Gas: <u> 394 </u>	Bbls H ₂ O: <u> 0 </u>	GOR: <u> 17909 </u>	
Test Method: <u> FLOWING </u>		Casing PSI: <u> 391 </u>	Tubing PSI: <u> </u>	Choke Size: <u> 18/64 </u>		
Gas Disposition: <u> SOLD </u>		Gas Type: <u> WET </u>	BTU Gas: <u> 1196 </u>	API Gravity Oil: <u> 63 </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: 30px;"></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>				

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Signed: _____ Print Name: CARA MAHLER

Title: REGULATORY ANALYST 1 Date: 5/5/2011 Email: CARA.MAHLER@ANADARKO.COM

Att Doc Num	Name
400162201	FORM 5A SUBMITTED

General Comments

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

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