

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400175104

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-

5. API Number 05-123-08678-00 6. County: WELD
7. Well Name: FLOYD ADLER GAS UNIT C Well Number: 1
8. Location: QtrQtr: SWNE Section: 33 Township: 3N Range: 68W Meridian: 6
9. Field Name: _____ Field Code: _____

Completed Interval

FORMATION: LAKOTA Status: ABANDONED COMPLETION
Treatment Date: 02/02/1977 Date of First Production this formation: 12/05/1976
Perforations Top: 7832 Bottom: 7839 No. Holes: 28 Hole size: 0.38
Provide a brief summary of the formation treatment: _____ Open Hole: ☐
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: _____
Abandoned for J Sand and Codell completion
Date formation Abandoned: 01/30/1977 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____
Bridge Plug Depth: 7700 Sacks cement on top: _____

Comment:

This well is on the Kerr-McGee OG #47120 Delinquency List for LKTA 08/2001-2/2011 with 115 missing reports. This Form 5A is to update the LKTA formation that it has been abandoned since 1977.

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

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)