


<b>FORM 5A</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 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;">400145208</div>	DE	ET	OE	ES
DE	ET	OE	ES				
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: <u>66571</u> 2. Name of Operator: <u>OXY USA WTP LP</u> 3. Address: <u>P O BOX 27757</u> City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77227</u>		4. Contact Name: <u>Joan Proulx</u> Phone: <u>(970) 263.3641</u> Fax: <u>(970) 263.3694</u>					
5. API Number <u>05-045-17884-00</u> 7. Well Name: <u>Shell</u> 8. Location:   QtrQtr: <u>NWNE</u> Section: <u>3</u> Township: <u>7S</u> Range: <u>97W</u> Meridian: <u>6</u> 9. Field Name: <u>GRAND VALLEY</u> Field Code: <u>31290</u>		6. County: <u>GARFIELD</u> Well Number: <u>697-34-16B</u>					
<u>Completed Interval</u>							
FORMATION: <u>WILLIAMS FORK - CAMEO</u>		Status: <u>WAITING ON COMPLETION</u>					
Treatment Date: <u>02/17/2011</u>		Date of First Production this formation: <u>03/19/2011</u>					
Perforations   Top: <u>5310</u> Bottom: <u>7012</u>	No. Holes: <u>207</u>	Hole size: <u>35/100</u>					
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
<div style="border: 1px solid black; padding: 2px;">         8 stages of slickwater frac with 21,733 bbls of frac fluid and 792,811 lbs of 20/40 white sand proppant       </div>							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>Test Information:</b>							
Date: _____	Hours: _____	Bbls oil: _____	Mcf Gas: _____				
Calculated 24 hour rate: _____		Bbls oil: _____	Mcf Gas: _____				
Test Method: _____		Casing PSI: _____	Tubing PSI: _____				
Gas Disposition: <u>SOLD</u>		Gas Type: <u>DRY</u>	BTU Gas: _____				
Tubing Size: <u>2 + 3/8</u>		Tubing Setting Depth: <u>6436</u>	Tbg setting date: <u>03/18/2011</u>				
Reason for Non-Production: _____							
Date formation Abandoned: _____   Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, number of sacks cmt _____							
Bridge Plug Depth: _____   Sacks cement on top: _____							
Comment: <div style="border: 1px solid black; padding: 5px;">         Preliminary Form 5A.          A subsequent Form 5A will be submitted once the BTU data is received.       </div>							

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

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Joan Proulx

Title: Regulatory Analyst Date: 4/4/2011 Email joan\_proulx@oxy.com  
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### **Attachment Check List**

Att Doc Num	Name
400145208	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)