

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



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Document Number:

400185767

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

5. API Number 05-123-20891-00  
6. County: WELD  
7. Well Name: SARCHET  
Well Number: 8-23A  
8. Location: QtrQtr: SENE Section: 23 Township: 3N Range: 66W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: GREENHORN Status: TEMPORARILY ABANDONED

Treatment Date: 06/07/2011 Date of First Production this formation: 10/09/2009  
Perforations Top: 7630 Bottom: 7675 No. Holes: 90 Hole size: 0.38

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

SAND PLUG SET @ 7780

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:

SAND PLUG SET @ 7780

Date formation Abandoned: 06/07/2011 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 7780 Sacks cement on top: \_\_\_\_\_

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 06/30/2011 Date of First Production this formation: 07/06/2011  
Perforations Top: 7177 Bottom: 7416 No. Holes: 122 Hole size: 0.42

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

NB PERF: 7177-7260 HOLES 66 SIZE .42 CD PERF: 7402-7416 HOLES 56 SIZE .38  
Frac Niobrara A & B & C down 4-1/2" Csg w/ 250 gal 15% HCl & 243,037 gal Slickwater w/ 201,560# 40/70, 4,000# SB Excel.  
Frac Codell down 4-1/2" Csg w/ 194,813 gal Slickwater w/ 150,720# 40/70, 4,180# SB Excel.

This formation is commingled with another formation: ☐ Yes ☒ No

#### Test Information:

Date: 08/08/2011 Hours: 24 Bbls oil: 19 Mcf Gas: 181 Bbls H2O: 0  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 19 Mcf Gas: 181 Bbls H2O: 0 GOR: 9526  
Test Method: FLOWING Casing PSI: 707 Tubing PSI: 459 Choke Size: 24/64  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1230 API Gravity Oil: 59  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7357 Tbg setting date: 07/12/2011 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: 8/11/2011

Email: CARA.MAHLER@ANADARKO.COM

**Attachment Check List**

Att Doc Num	Name
400185767	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments****User Group****Comment****Comment Date**

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Total: 0 comment(s)