

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:

2586956

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: 96850 4. Contact Name: JENN MENDOZA  
2. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY LLC Phone: (303) 260-4566  
3. Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8285  
City: DENVER State: CO Zip: 80202

5. API Number 05-103-10705-00 6. County: RIO BLANCO  
7. Well Name: FEDERAL RGU Well Number: 32-5-298  
8. Location: QtrQtr: SWNE Section: 5 Township: 2S Range: 98W Meridian: 6  
9. Field Name: SULPHUR CREEK Field Code: 80090

Completed Interval

FORMATION: <u>COZZETTE</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>11/13/2006</u>		Date of First Production this formation: <u>11/20/2006</u>	
Perforations	Top: <u>9748</u> Bottom: <u>9751</u>	No. Holes: <u>72</u>	Hole size: <u>42/100</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
<u>133000# 20/40 SAND; 8550# 100 MESH SAND; 3779 BBLS SLICKWATER</u>			
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Test Information:</b>			
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: <u>0</u>	API Gravity Oil: <u>0</u>
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____
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: _____			

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 11/13/2006 Date of First Production this formation: 11/20/2006

Perforations Top: 9905 Bottom: 10175 No. Holes: 48 Hole size: 42/100

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

133000# 20/40 SAND; 8550# 100 MESH SAND; 3779 BBLS SLICKWATER

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: 0 API Gravity Oil: 0

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: \_\_\_\_\_

FORMATION: SEGO Status: PRODUCING

Treatment Date: 11/13/2006 Date of First Production this formation: 11/20/2006

Perforations Top: 10335 Bottom: 10512 No. Holes: 48 Hole size: 42/100

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

74500# 20/40 SAND; 4700 100 MESH SAND; 2182 BBLS SLICKWATER

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: 0 API Gravity Oil: 0

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: \_\_\_\_\_

FORMATION: WILLIAMS FORK - CAMEO

Status: PRODUCING

Treatment Date: 11/13/2006

Date of First Production this formation: 11/20/2006

Perforations Top: 7381 Bottom: 9451 No. Holes: 276 Hole size: 42/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

8,172 GAL 10% HCL ACID, 1,134,500# 20/40 SAND 16,900# 100 MESH SAND, 27,054 BBLS SLICKWATER

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: 0 API Gravity Oil: 0

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:

FORMATION: WILLIAMS FORK-ILES

Status: COMMINGLED

Treatment Date: 11/13/2006

Date of First Production this formation: 11/20/2006

Perforations Top: 7381 Bottom: 10512 No. Holes: 444 Hole size: 42/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

8,172 GAL 10% HCL ACID; 1475000# 20/40 SAND; 38700# 100 MESH SAND; BBLS SLICKWATER

This formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**

Date: 02/03/2007 Hours: 24 Bbls oil: 0 Mcf Gas: 587 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls H2O: GOR:

Test Method: FLOWING Casing PSI: 873 Tubing PSI: 432 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1114 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 10396 Tbg setting date: 03/07/2007 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: JENN MENDOZA

Title: PERMIT TECH Date: 4/25/2011 Email: JENN.MENDOZA@WILLIAMS.COM

### Attachment Check List

Att Doc Num	Name
2586956	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)