

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:

400194424

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: 10079 4. Contact Name: Hannah Knopping  
2. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION Phone: (303) 357-6412  
3. Address: 1625 17TH ST STE 300 Fax: (303) 357-7315  
City: DENVER State: CO Zip: 80202

5. API Number 05-045-13633-00 6. County: GARFIELD  
7. Well Name: DEVER Well Number: A6  
8. Location: QtrQtr: SWSE Section: 18 Township: 6S Range: 92W Meridian: 6  
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: COZZETTE Status: TEMPORARILY ABANDONED

Treatment Date: 06/19/2011 Date of First Production this formation: 04/09/2008  
Perforations Top: 8166 Bottom: 8361 No. Holes: 33 Hole size: 0.42

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:

Cozzette is T&A'd by CIBP

Date formation Abandoned: 06/19/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 8125 Sacks cement on top: 4

FORMATION: CORCORAN Status: TEMPORARILY ABANDONED

Treatment Date: 06/19/2011 Date of First Production this formation: 04/09/2008

Perforations Top: 8425 Bottom: 8530 No. Holes: 36 Hole size: 0.42

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: \_\_\_\_\_

Corcoran is T&A'd by CIBP

Date formation Abandoned: 06/19/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 8125 Sacks cement on top: 4

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 07/05/2011 Date of First Production this formation: 04/09/2008

Perforations Top: 5903 Bottom: 7570 No. Holes: 233 Hole size: 0.42

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

(Recomplete) Frac'd with 39,386 bbls of 2% KCL slickwater, 725,600 lbs of 20/40 sand and 88,300 lbs 20/40 SLC sand  
WFCM Total perms: 141 (Original) + 92 (New Recomplete) = 233

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

**Test Information:**

Date: 07/18/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 1272 Bbls H2O: 665

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 0 Mcf Gas: 1272 Bbls H2O: 665 GOR: 0

Test Method: Flowing Casing PSI: 450 Tubing PSI: 0 Choke Size: 30/36

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1058 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6262 Tbg setting date: 07/21/2011 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: Hannah Knopping

Title: Permit Representative Date: \_\_\_\_\_ Email: hknopping@anteroresources.com

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

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

**Attachment Check List**

Att Doc Num	Name
400194487	WIRELINE JOB SUMMARY

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)