

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:

400199273

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: 100264

2. Name of Operator: XTO ENERGY INC

3. Address: 382 CR 3100

City: AZTEC State: NM Zip: 87410

4. Contact Name: Wanett McCauley

Phone: (505) 333-3630

Fax: (505) 333-3284

5. API Number 05-071-07437-00

7. Well Name: APACHE CANYON

8. Location: QtrQtr: NWSW Section: 11 Township: 34S Range: 68W Meridian: 6

9. Field Name: PURGATOIRE RIVER Field Code: 70830

6. County: LAS ANIMAS

Well Number: 11-12V

Completed Interval

FORMATION: RATON-VERMEJO COALS

Status: PRODUCING

Treatment Date: Date of First Production this formation: 08/03/2011

Perforations Top: 376 Bottom: 1868 No. Holes: 248 Hole size: 42/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

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

Test Information:

Date: 08/15/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 55 Bbls H2O: 11

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 55 Bbls H2O: 11 GOR: 0

Test Method: Pumping Casing PSI: -2 Tubing PSI: 1 Choke Size:

Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 944 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 1902 Tbg setting date: 07/15/2011 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:

FORMATION: RATON COAL Status: COMMINGLED

Treatment Date: 07/12/2011 Date of First Production this formation: 08/03/2011

Perforations Top: 376 Bottom: 693 No. Holes: 96 Hole size: 42/100

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

Acidized w/2,100 gals 15% HCl acid. Frac'd w/106,395 gals 20# Delta 140 w/Sandwedge OS carrying 373,800# 16/30 Nebraska sd.

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: \_\_\_\_\_

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

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

FORMATION: VERMEJO COAL Status: COMMINGLED

Treatment Date: 07/11/2011 Date of First Production this formation: 03/29/2002

Perforations Top: 1574 Bottom: 1868 No. Holes: 152 Hole size: 51/100

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

Acidized w/2,000 gals 15% HCl acid. Refrac'd w/53,632 gals 20# Delta 140 w/Sandwedge OS carrying 180,800# 16/30 Nebraska sd.

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: \_\_\_\_\_

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: Wanett McCauley

Title: Reg Compliance Technician Date: 8/24/2011 Email: wanett\_mccauley@xtoenergy.com

### Attachment Check List

Att Doc Num	Name
400199273	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)