

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:

400203428

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

4. Contact Name: CARA MAHLER

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6029

3. Address: P O BOX 173779

Fax: (720) 929-7029

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-20996-00

6. County: WELD

7. Well Name: VYNCKIER

Well Number: 15-2A7952

8. Location: QtrQtr: SWSE Section: 2

Township: 2N

Range: 67W

Meridian: 6

9. Field Name: WATTENBERG

Field Code: 90750

### Completed Interval

FORMATION: J-NIOBRARA-CODELL

Status: COMMINGLED

Treatment Date: 08/10/2011

Date of First Production this formation: 08/15/2011

Perforations Top: 7145 Bottom: 7864 No. Holes: 208 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

REMOVED CIBP SET @ 7700 TO COMMINGLE JSND WITH NB/CD.

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: J SAND

Status: PRODUCING

Treatment Date: 08/10/2011

Date of First Production this formation: 07/15/2002

Perforations Top: 7815 Bottom: 7864 No. Holes: 82 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

REMOVED CIBP SET @ 7700

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

Date: 09/03/2011 Hours: 24 Bbls oil: 8 Mcf Gas: 114 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 8 Mcf Gas: 114 Bbls H2O: 0 GOR: 14250

Test Method: FLOWING Casing PSI: 453 Tubing PSI: 382 Choke Size:

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1294 API Gravity Oil: 50

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:

NO CHOKE

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: 9/8/2011 CARA.MAHLER@ANADARKO.COM

Email  
:

### **Attachment Check List**

Att Doc Num	Name
400203428	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)