

FORM 5A

Rev 02/08

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

400203340

## 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: 69175 4. Contact Name: Jeff Glossa  
 2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION Phone: (303) 831-3972  
 3. Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 860-5838  
 City: DENVER State: CO Zip: 80203

5. API Number 05-123-33024-00 6. County: WELD  
 7. Well Name: Wilson Well Number: 24-30H  
 8. Location: QtrQtr: SESW Section: 30 Township: 7N Range: 63W Meridian: 6  
 9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING  
 Treatment Date: 07/16/2011 Date of First Production this formation: 07/22/2011  
 Perforations Top: 7201 Bottom: 11312 No. Holes: \_\_\_\_\_ Hole size: \_\_\_\_\_  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:   
Frac in 16 stages w/ 72555 bbl 24# fluid system 3858000 20/40 sand  
 This formation is commingled with another formation:  Yes  No  
**Test Information:**  
 Date: 07/31/2011 Hours: 24 Bbls oil: 182 Mcf Gas: 93 Bbls H2O: 221  
 Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 182 Mcf Gas: 93 Bbls H2O: 221 GOR: 511  
 Test Method: Flowing Casing PSI: 899 Tubing PSI: 280 Choke Size: 20/64  
 Gas Disposition: SOLD Gas Type: WET BTU Gas: 1333 API Gravity Oil: 42  
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5948 Tbg setting date: 07/25/2011 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: Jeff Glossa  
 Title: Sr Engineering Tech Date: 9/9/2011 Email: jpglossa@petd.com

### Attachment Check List

Att Doc Num	Name
400203340	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)