

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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**COMPLETED INTERVAL REPORT**

Document Number:  
400206478

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: <u>47120</u>	4. Contact Name: <u>CARA MAHLER</u>
2. Name of Operator: <u>KERR-MCGEE OIL &amp; GAS ONSHORE LP</u>	Phone: <u>(720) 929-6029</u>
3. Address: <u>P O BOX 173779</u>	Fax: <u>(720) 929-7029</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-</u>	

5. API Number <u>05-123-22039-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>ALVIN</u>	Well Number: <u>12-19</u>
8. Location: QtrQtr: <u>NWSW</u> Section: <u>19</u> Township: <u>2N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

### Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED

Treatment Date: 08/16/2011 Date of First Production this formation: 11/02/2008  
Perforations Top: 7922 Bottom: 7953 No. Holes: 93 Hole size: 0.42

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

SPOT 2455# OF 20/40 SAND TO 7722

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:

SPOT 2455# OF 20/40 SAND TO 7722

Date formation Abandoned: 08/16/2011 Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 7722 Sacks cement on top: \_\_\_\_\_

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 08/24/2011 Date of First Production this formation: 09/06/2011  
Perforations Top: 7272 Bottom: 7465 No. Holes: 132 Hole size: 0.38

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

CDL RE PERF (8/17/2011) 7447-7459 HOLES 24 SIZE .38  
Re-Frac Codell down 4-1/2" Csg w/ 200,831 gal Slickwater w/ 151,360# 40/70, 4,000# SuperLC.

This formation is commingled with another formation:  Yes  No

#### Test Information:

Date: 09/10/2011 Hours: 24 Bbls oil: 23 Mcf Gas: 60 Bbls H2O: 0  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 23 Mcf Gas: 60 Bbls H2O: 0 GOR: 2609  
Test Method: FLOWING Casing PSI: 1247 Tubing PSI: 560 Choke Size: 18/64  
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1209 API Gravity Oil: 40  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7424 Tbg setting date: 08/29/2011 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: CARA MAHLER

**Attachment Check List**

Att Doc Num	Name
400206478	FORM 5A SUBMITTED

Total Attach: 1 Files

**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>

Total: 0 comment(s)