



FORMATION: CORCORAN Status: TEMPORARILY ABANDONED

Treatment Date: 12/21/2009 Date of First Production this formation: 05/24/2008

Perforations Top: 8634 Bottom: 8779 No. Holes: 45 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:

CRCRN is T&A'd by CIBP

Date formation Abandoned: 12/21/2009 Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 8338 Sacks cement on top: \_\_\_\_\_

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 01/13/2010 Date of First Production this formation: 05/24/2008

Perforations Top: 6058 Bottom: 7794 No. Holes: 240 Hole size: 0.42

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

Recomplete on 1/13/10-1/15/10: Frac'd with 2756 bbls of 2%KCL & 936,420 lbs of sand.

Total Perfs 138 (Original) + 102 (Recomplete) = 240

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 01/29/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 546 Bbls H2O: 106

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 0 Mcf Gas: 546 Bbls H2O: 106 GOR: 0

Test Method: Flowing Casing PSI: 1069 Tubing PSI: 495 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1180 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6890 Tbg setting date: 09/12/2010 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:

There are some corrections to perforation information from Original Form 5A.

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
400215126	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)