

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:

400216025

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 05-123-22239-00

6. County: WELD

7. Well Name: BEEBE

Well Number: 10-34

8. Location: QtrQtr: NWSE Section: 34

Township: 4N

Range: 65W

Meridian: 6

9. Field Name: WATTENBERG

Field Code: 90750

Completed Interval

FORMATION: J SAND

Status: TEMPORARILY ABANDONED

Treatment Date: 08/31/2011

Date of First Production this formation: 04/23/2006

Perforations Top: 7590 Bottom: 7654 No. Holes: 112 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

SET SAND PLUG @ 7340-7600

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:

SET SAND PLUG @ 7340-7600

Date formation Abandoned: 08/31/2011 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

Bridge Plug Depth: 7600 Sacks cement on top:

FORMATION: NIOBRARA-CODELL

Status: PRODUCING

Treatment Date: 09/28/2011

Date of First Production this formation: 08/05/2004

Perforations Top: 6864 Bottom: 7148 No. Holes: 120 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐REPERF CDL (9/2/2011) 7130-7148 HOLES 36 SIZE .38
Re-Frac Codell down 4-1/2" Csg w/ 270,690 gal Slickwater w/ 209,360# 40/70, 4,000# SB Excel.This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: 10/12/2011 Hours: 24 Bbls oil: 8 Mcf Gas: 247 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 8 Mcf Gas: 247 Bbls H2O: 0 GOR: 30875

Test Method: FLOWING Casing PSI: 1005 Tubing PSI: Choke Size: 22/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1189 API Gravity Oil: 62

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: CARA MAHLER

Title: REGULATORY ANALYST 1

Date: 10/18/2011

Email: CARA.MAHLER@ANADARKO.COM

Attachment Check List

Att Doc Num	Name
400216025	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)