

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:

400217728

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: 10084  
2. Name of Operator: PIONEER NATURAL RESOURCES USA INC  
3. Address: 1401 17TH ST STE 1200  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Judy Glinisty  
Phone: (303) 675-2658  
Fax: (303) 294-1275

5. API Number 05-071-09874-00  
6. County: LAS ANIMAS  
7. Well Name: GRAHAM  
Well Number: 32-22 TR  
8. Location: QtrQtr: SW/NE Section: 22 Township: 32S Range: 66W Meridian: 6  
9. Field Name: PURGATOIRE RIVER Field Code: 70830

Completed Interval

FORMATION: RATON COAL	Status: PRODUCING
Treatment Date: 08/30/2011	Date of First Production this formation: 09/14/2011
Perforations Top: 766 Bottom: 1841	No. Holes: 312 Hole size: 0.48
Provide a brief summary of the formation treatment: Open Hole: <input type="checkbox"/>	
Fraced intervals at 766' - 768', 793' - 796', 814' - 818', 824' - 826', 861' - 863', 868' - 871', 876' - 882', 884' - 886', 923' - 927', 936' - 939', 1000' - 1002', 1006' - 1008', 1013' - 1015', 1078' - 1081', 1276' - 1279', 1348' - 1352', 1354' - 1356', 1476' - 1484', 1510' - 1513', 1536' - 1539', 1570' - 1573', 1596' - 1599', 1645' - 1649', 1699' - 1702', 1838' - 1841'. 16/30 - 464,939# - N2 - 33,420 hscf - 3,021 bbls 15# linear - 336 gals 15% HCl.	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Test Information:</b>	
Date: 09/17/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 78 Bbls H2O: 174	
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 78 Bbls H2O: 174 GOR: 0	
Test Method: Pumping Casing PSI: 50 Tubing PSI: 0 Choke Size: 16/64	
Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: 1004 API Gravity Oil: 0	
Tubing Size: 2 + 7/8 Tubing Setting Depth: 1899 Tbg setting date: 09/12/2011 Packer Depth: 0	
Reason for Non-Production:	
<div></div>	
Date formation Abandoned: Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> 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: Judy Glinisty  
Title: Sr. Engineering Tech Date: \_\_\_\_\_ Email: Judy.Glinisty@pxd.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
400217732	WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)