

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:

400245849

## 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: 16700 4. Contact Name: Julie Justus  
2. Name of Operator: CHEVRON USA INC Phone: (970) 257-6042  
3. Address: 6001 BOLLINGER CANYON RD Fax: (970) 245-6489  
City: SAN RAMON State: CA Zip: 94583

5. API Number 05-045-17216-00 6. County: GARFIELD  
7. Well Name: SKR Well Number: 698-04-AV-13  
8. Location: QtrQtr: NESW Section: 4 Township: 6S Range: 98W Meridian: 6  
9. Field Name: SKINNER RIDGE Field Code: 77548

## Completed Interval

|   |   |
|---|---|
| FORMATION: <u>COZZETTE</u>  | Status: <u>PRODUCING</u>  |
| Treatment Date: <u>07/01/2011</u>   | Date of First Production this formation: <u>07/02/2011</u>              |
| Perforations Top: <u>6479</u> Bottom: <u>6618</u>   | No. Holes: <u>21</u> Hole size: <u>0.35</u>                             |
| Provide a brief summary of the formation treatment:   | Open Hole: <input type="checkbox"/>                                     |
| <u>138,049 gallons of clean water pumped with 81,433 pounds of sand.</u>  |   |
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No            |   |
| <b>Test Information:</b>  |   |
| 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: _____  |   |
| 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: _____   |   |

|  |                             |   |                                     |                          |            |
|--|-----------------------------|---|-------------------------------------|--------------------------|------------|
| FORMATION: <u>CORCORAN</u>   |                             |   |                                     | Status: <u>PRODUCING</u> |            |
| Treatment Date: <u>07/01/2011</u>  |                             | Date of First Production this formation: <u>06/23/2011</u>        |                                     |                          |            |
| Perforations   | Top: <u>6718</u>            | Bottom: <u>6840</u>   | No. Holes: <u>33</u>                | Hole size: <u>0.35</u>   |            |
| Provide a brief summary of the formation treatment:  |                             |   | Open Hole: <input type="checkbox"/> |                          |            |
| 189,939 gallons of clean water pumped with 109,867 pounds of sand.   |                             |   |                                     |                          |            |
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                             |   |                                     |                          |            |
| <b>Test Information:</b>   |                             |   |                                     |                          |            |
| 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: _____   |                             |   |                                     |                          |            |
|  |                             |   |                                     |                          |            |
| 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: _____  |                                     |                          |            |

|  |                             |   |                                     |                          |            |
|--|-----------------------------|---|-------------------------------------|--------------------------|------------|
| FORMATION: <u>ROLLINS</u>  |                             |   |                                     | Status: <u>PRODUCING</u> |            |
| Treatment Date: <u>07/09/2011</u>  |                             | Date of First Production this formation: <u>08/07/2011</u>        |                                     |                          |            |
| Perforations   | Top: <u>6246</u>            | Bottom: <u>6259</u>   | No. Holes: <u>6</u>                 | Hole size: <u>0.35</u>   |            |
| Provide a brief summary of the formation treatment:  |                             |   | Open Hole: <input type="checkbox"/> |                          |            |
| 50,764 gallons of clean water pumped with 32,467 pounds of sand.   |                             |   |                                     |                          |            |
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                             |   |                                     |                          |            |
| <b>Test Information:</b>   |                             |   |                                     |                          |            |
| 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: _____   |                             |   |                                     |                          |            |
|  |                             |   |                                     |                          |            |
| 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: _____  |                                     |                          |            |

|  |                                   |  |                                     |                          |               |
|--|-----------------------------------|--|-------------------------------------|--------------------------|---------------|
| FORMATION: <u>WILLIAMS FORK-ILES</u>   |                                   |  |                                     | Status: <u>PRODUCING</u> |               |
| Treatment Date: <u>08/20/2011</u>  |                                   | Date of First Production this formation: <u>06/23/2011</u>                   |                                     |                          |               |
| Perforations   | Top: <u>4026</u>                  | Bottom: <u>6840</u>  | No. Holes: <u>291</u>               | Hole size: <u>0.35</u>   |               |
| Provide a brief summary of the formation treatment:  |                                   |  | Open Hole: <input type="checkbox"/> |                          |               |
| <u>1,794,208 gallons of clean water pumped with 1,048,609 pounds of sand.</u>  |                                   |  |                                     |                          |               |
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                   |  |                                     |                          |               |
| <b>Test Information:</b>   |                                   |  |                                     |                          |               |
| Date: <u>11/03/2011</u>  | Hours: <u>24</u>                  | Bbls oil: <u>0</u>   | Mcf Gas: <u>1095</u>                | Bbls H2O: <u>241</u>     |               |
| Calculated 24 hour rate:   |                                   | Bbls oil: <u>0</u>   | Mcf Gas: <u>1095</u>                | Bbls H2O: <u>241</u>     | GOR: <u>0</u> |
| Test Method: <u>Flowing</u>  | Casing PSI: <u>1610</u>           | Tubing PSI: <u>1240</u>  | Choke Size: <u>16/64</u>            |                          |               |
| Gas Disposition: <u>SOLD</u>   | Gas Type: <u>DRY</u>              | BTU Gas: <u>1086</u>   | API Gravity Oil: <u>0</u>           |                          |               |
| Tubing Size: <u>2 + 3/8</u>  | Tubing Setting Depth: <u>6585</u> | Tbg setting date: <u>11/02/2011</u>  | Packer Depth: _____                 |                          |               |
| Reason for Non-Production:<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div>                    |                                   |  |                                     |                          |               |
| Date formation Abandoned: _____  |                                   | Squeeze: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, number of sacks cmt _____   |                          |               |
| Bridge Plug Depth: _____   |                                   | Sacks cement on top: _____   |                                     |                          |               |

|  |                             |   |                                     |                          |            |
|--|-----------------------------|---|-------------------------------------|--------------------------|------------|
| FORMATION: <u>WILLIAMS FORK</u>  |                             |   |                                     | Status: <u>PRODUCING</u> |            |
| Treatment Date: <u>08/20/2011</u>  |                             | Date of First Production this formation: <u>07/07/2011</u>        |                                     |                          |            |
| Perforations   | Top: <u>4026</u>            | Bottom: <u>6234</u>   | No. Holes: <u>231</u>               | Hole size: <u>0.35</u>   |            |
| Provide a brief summary of the formation treatment:  |                             |   | Open Hole: <input type="checkbox"/> |                          |            |
| <u>1,415,456 gallons of clean water pumped with 824,842 pounds of sand.</u>  |                             |   |                                     |                          |            |
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                             |   |                                     |                          |            |
| <b>Test Information:</b>   |                             |   |                                     |                          |            |
| 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:<br><div style="border: 1px solid black; height: 20px; width: 100%;"></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:<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div> |
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|  |             |                                  |  |
|--|-------------|----------------------------------|--|
| I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete. |             |                                  |  |
| Signed: _____  |             | Print Name: <u>Julie Justus</u>  |  |
| Title: <u>Regulatory Specialist</u>  | Date: _____ | Email <u>jjustus@chevron.com</u> |  |

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             |
|-------------|------------------|
| 400245851   | WELLBORE DIAGRAM |

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)