

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:

400245802

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

5. API Number 05-045-17214-00
6. County: GARFIELD
7. Well Name: SKR
Well Number: 698-04-AV-05
8. Location: QtrQtr: NESW Section: 4 Township: 6S Range: 98W Meridian: 6
9. Field Name: SKINNER RIDGE Field Code: 77548

Completed Interval

FORMATION: ROLLINS Status: PRODUCING

Treatment Date: 06/21/2011 Date of First Production this formation: 06/22/2011

Perforations Top: 6005 Bottom: 6027 No. Holes: 9 Hole size: 0.35

Provide a brief summary of the formation treatment: Open Hole: ☐

59,513 gallons of clean water pumped with 36,533 pounds of sand.

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:

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: WILLIAMS FORK-ILESStatus: COMMINGLEDTreatment Date: 08/19/2011Date of First Production this formation: 06/22/2011Perforations Top: 3882 Bottom: 6027 No. Holes: 225 Hole size: 0.35

Provide a brief summary of the formation treatment:

Open Hole: ☐1,439,504 gallons of clean water pumped with 83,3007 pounds of sand.This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 09/02/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 975 Bbls H2O: 298Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 975 Bbls H2O: 298 GOR: 0Test Method: Flowing Casing PSI: 1560 Tubing PSI: 1180 Choke Size: 16/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1086 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 5319 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: FORMATION: WILLIAMS FORKStatus: PRODUCINGTreatment Date: 08/19/2011Date of First Production this formation: 06/22/2011Perforations Top: 3882 Bottom: 5955 No. Holes: 216 Hole size: 0.35

Provide a brief summary of the formation treatment:

Open Hole: ☐1,379,991 gallons of clean water pumped with 846,767 pounds of sand.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:

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: Julie JustusTitle: Regulatory Specialist Date: 1/26/2012 Email: jjustus@chevron.com

Attachment Check List

Att Doc Num	Name
2537811	WELLBORE DIAGRAM
400245802	FORM 5A SUBMITTED
400245810	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold--passed	1/27/2012 8:26:50 AM
Permit	On Hold--This is corrected 5A to report WMFK & RLNS. Oper. submitting recomplete APD & sundry for RLNS. Need to unapprove 5A #400242626 and delete. will approve this 5A when APD processed.	1/26/2012 1:15:39 PM

Total: 2 comment(s)