

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:

400267274

Date Received:

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: Cindy Vue  
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6832  
3. Address: P O BOX 173779 Fax: (720) 929-7832  
City: DENVER State: CO Zip: 80217-

5. API Number 05-123-33806-00 6. County: WELD  
7. Well Name: JEPSEN Well Number: 23A-2  
8. Location: QtrQtr: SESW Section: 2 Township: 3N Range: 65W Meridian: 6  
9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

Completed Interval

FORMATION: PIERRE Status: ABANDONED

Treatment Date: 10/04/2011 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 828 Bottom: 1232 No. Holes: 132 Hole size: 0.42

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

10/4/2011 PERFORATED PIERRE SHALE  
10/5-6/2011 SWABBED FOR 6 HR.  
10/7/2011 SET PRODUCTION 2-3/8" TUBING @ 1212'  
10/21-24/2011 SWABBED WELL, SI.

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: 2 + 3/8 Tubing Setting Depth: 1212 Tbg setting date: 10/07/2011 Packer Depth: \_\_\_\_\_

Reason for Non-Production:

PERFORATED TO FLARE GAS IN EFFORT TO REDUCE PRESSURE IN THIS WELL. SEE ATTACHED FORM 4 FOR ENTIRE INTENT OF OPERATIONS. AFTER SHUTTING IN WELL, IT HAS BEEN DECIDED THIS WELL WILL BE PLUGGED AND ABANDONED.

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: Cindy Vue

Title: Regulatory Analyst II

Date: \_\_\_\_\_

Email Cindy.Vue@anadarko.com

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**Attachment Check List**

Att Doc Num	Name
400267279	WELLBORE DIAGRAM
400267280	OTHER
400267286	CORRESPONDENCE

Total Attach: 3 Files

**General Comments****User Group****Comment****Comment Date**

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Total: 0 comment(s)