

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:

400270930

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: 66561

4. Contact Name: Joan Proulx

2. Name of Operator: OXY USA INC

Phone: (970) 263-3641

3. Address: PO BOX 27757

Fax: (970) 263-3694

City: HOUSTON State: TX Zip: 77227

5. API Number 05-077-09036-00

6. County: MESA

7. Well Name: GIPP

Well Number: 13-16

8. Location: QtrQtr: NESE Section: 13

Township: 9S

Range: 94W

Meridian: 6

9. Field Name: BRUSH CREEK

Field Code: 7562

Completed Interval

FORMATION: CORCORANStatus: PRODUCINGTreatment Date: 10/16/2006Date of First Production this formation: 10/27/2006Perforations Top: 8185 Bottom: 8225 No. Holes: 12 Hole size: 34/100

Provide a brief summary of the formation treatment:

Open Hole: ☐Slickwater frac with 500 glns frac fluid and 30,000 lbs of white sand proppantThis formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**Date: 04/05/2012 Hours: 2 Bbls oil: 0 Mcf Gas: 1 Bbls H2O: 1Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 12 Bbls H2O: 12 GOR: 0Test Method: Flowing Casing PSI: 103 Tubing PSI: 208 Choke Size: 24/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1070 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7535 Tbg setting date: 04/05/2012 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 - CAMEOStatus: PRODUCINGTreatment Date: 10/16/2006Date of First Production this formation: 10/27/2006Perforations Top: 6118 Bottom: 7548 No. Holes: 105 Hole size: 34/100

Provide a brief summary of the formation treatment:

Open Hole: ☐Slickwater frac with 3,500 glns frac fluid and 424,800 white sand proppantThis formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**Date: 04/05/2012 Hours: 2 Bbls oil: 0 Mcf Gas: 2 Bbls H2O: 1Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 24 Bbls H2O: 12 GOR: 0Test Method: Flowing Casing PSI: 103 Tubing PSI: 208 Choke Size: 24/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1070 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7535 Tbg setting date: 04/05/2012 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:

Repair work occurred on the Gipp 13-16 well from 4/3/12 - 4/5/12 to repair a hole in the tubing. One hole was found at 3,465' with some scale buildup. The tubing was pulled and relanded, and the well was returned to production.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Joan Proulx

Title: Regulatory Analyst

Date: _____

Email joan_proulx@oxy.com

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Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)