

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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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: 66571 4. Contact Name: Joan Proulx  
 2. Name of Operator: OXY USA WTP LP Phone: (970) 263-3641  
 3. Address: P O BOX 27757 Fax: (970) 263-3694  
 City: HOUSTON State: TX Zip: 77227

5. API Number 05-045-12225-00 6. County: GARFIELD  
 7. Well Name: CASCADE CREEK Well Number: 697-16-37D  
 8. Location: QtrQtr: SENW Section: 16 Township: 6S Range: 97W Meridian: 6  
 9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 09/09/2006 Date of First Production this formation: 09/22/2006

Perforations Top: 7371 Bottom: 8545 No. Holes: 129 Hole size: 41/100

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

5 stage of slickwater frac with 12,719 bbls of frac fluid and 471,350 lbs of white sand proppant

This formation is commingled with another formation:  Yes  No

Test Information:

Date: 04/11/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 482 Bbls H2O: 4

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 482 Bbls H2O: 4 GOR: 0

Test Method: Flowing Casing PSI: 457 Tubing PSI: 278 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1061 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7956 Tbg setting date: 03/27/2012 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:

Payadd work was intended for the 697-16-37D well; however, it was decided to not do the perf/frac work and instead the tubing was pulled, the well cleaned, tubing was re-landed and the well was returned to production. Please note: the original Form 5A dated 9/21/07 had an incorrect formation; the correct formation name is WMFK/CME0.

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

### 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)