

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:

400274514

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: JOEL MALEFYT

2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6828

3. Address: P O BOX 173779

Fax: (720) 929-7828

City: DENVER State: CO Zip: 80217-

5. API Number 05-123-21021-00

6. County: WELD

7. Well Name: HSR-DAVIS STATE

Well Number: 9-16A

8. Location: QtrQtr: NESE Section: 16 Township: 3N

Range: 67W Meridian: 6

9. Field Name: Field Code:

Completed Interval

FORMATION: J-NIOBRARA-CODELLStatus: COMMINGLEDTreatment Date: 03/15/2012Date of First Production this formation: 03/21/2012Perforations Top: 6815 Bottom: 7558 No. Holes: 174 Hole size: 0.4

Provide a brief summary of the formation treatment:

Open Hole: ☐

PERF NBRR 6815-6957 HOLES 60 SIZE .42
PERF CODL 7074-7090 HOLES 32 SIZE .4
PERF JSND 7507-7558 HOLES 82 SIZE .38

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 03/22/2012 Hours: 24 Bbls oil: 1 Mcf Gas: 36 Bbls H2O: 0Calculated 24 hour rate: Bbls oil: 1 Mcf Gas: 36 Bbls H2O: 0 GOR: 36000Test Method: FLOWING Casing PSI: 770 Tubing PSI: 755 Choke Size: 0Gas Disposition: SOLD Gas Type: WET BTU Gas: 1223 API Gravity Oil: 54Tubing Size: 2 + 3/8 Tubing Setting Depth: 7470 Tbg setting date: 03/16/2012 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: J SANDStatus: PRODUCINGTreatment Date: 03/15/2012Date of First Production this formation: 09/10/2002Perforations Top: 7507 Bottom: 7558 No. Holes: 82 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: ☐

PERF JSND 7507-7558 HOLES 82 SIZE .38
3/15/2012 -DRILLED OUT SAND PLUG ON TO COMMINGLE JSND WITH NBRR-CODL
3/21/2012 -J-NIOBRARA-CODELL COMMINGLED

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: JOEL MALEFYT _____

Title: REGULATORY ANALYST _____

Date: _____

Email: JOEL.MALEFYT@ANADARKO.COM _____

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Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)