

**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



DE	ET	OE	ES
----	----	----	----

Document Number:  
400276766

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: <u>66561</u>	4. Contact Name: <u>Joan Proulx</u>
2. Name of Operator: <u>OXY USA INC</u>	Phone: <u>(970) 263-3641</u>
3. Address: <u>PO BOX 27757</u>	Fax: <u>(970) 263-3694</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77227</u>	

5. API Number <u>05-077-09229-00</u>	6. County: <u>MESA</u>
7. Well Name: <u>NICHOLS</u>	Well Number: <u>24-3</u>
8. Location: QtrQtr: <u>SENW</u> Section: <u>24</u> Township: <u>9S</u> Range: <u>94W</u> Meridian: <u>6</u>	
9. Field Name: <u>BRUSH CREEK</u> Field Code: <u>7562</u>	

### Completed Interval

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 08/29/2007 Date of First Production this formation: 10/28/2007

Perforations Top: 7874 Bottom: 7895 No. Holes: 12 Hole size: 34/100

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

1 stage of slickwater frac with 1,521 bbls of frac fluid and 50,181 lbs of white sand proppant

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 04/25/2012 Hours: 15 Bbls oil: 0 Mcf Gas: 33 Bbls H2O: 1

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 0 Mcf Gas: 53 Bbls H2O: 1 GOR: 0

Test Method: Flowing Casing PSI: 430 Tubing PSI: 140 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1058 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7060 Tbg setting date: 04/18/2012 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 - CAMEO Status: PRODUCING

Treatment Date: 08/29/2007 Date of First Production this formation: 10/28/2007

Perforations Top: 5730 Bottom: 7219 No. Holes: 144 Hole size: 34/100

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

7 stages of slickwater frac with 20,443 bbls of frac fluid and 781,587 lbs of white sand proppant

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 04/25/2012 Hours: 15 Bbls oil: 0 Mcf Gas: 296 Bbls H2O: 9

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 0 Mcf Gas: 482 Bbls H2O: 9 GOR: 0

Test Method: Flowing Casing PSI: 430 Tubing PSI: 140 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1058 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7060 Tbg setting date: 04/18/2012 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 this well from 4/17-4/20/2012 for a hole in the tubing.

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: \_\_\_\_\_ joan\_proulx@oxy.com

Email  
:

---

### **Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>

Total Attach: 0 Files

### **General Comments**

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

Total: 0 comment(s)