

FORM
5A

Rev
06/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400269696

Date Received:

04/09/2012

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: 96850
2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC
3. Address: 1001 17TH STREET - SUITE #1200
City: DENVER State: CO Zip: 80202
4. Contact Name: Julie Lawson
Phone: (303) 260-4533
Fax: (303) 629-8268

5. API Number 05-045-20481-00
6. County: GARFIELD
7. Well Name: ExxonMobil
Well Number: GM 513-23
8. Location: QtrQtr: NWSW Section: 23 Township: 6S Range: 96W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type:
Treatment Date: 12/07/2011 End Date: Date of First Production this formation: 12/28/2011
Perforations Top: 5878 Bottom: 7433 No. Holes: 125 Hole size: 0.35

Provide a brief summary of the formation treatment:

Open Hole: ☐

3500 gal 7.5% HCL; 1050100# 30/50 Sand; 47977 BBL's Slickwater (Summary).

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl):

Max pressure during treatment (psi):

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment:

Number of staged intervals:

Total acid used in treatment (bbl):

Max frac gradient (psi/ft):

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback:

Total proppant used (lbs):

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/22/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1116 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1116 Bbl H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 1565 Tubing PSI: 1522 Choke Size: 12/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1054 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7280 Tbg setting date: 02/01/2012 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:

Form 5 submitted 400269672

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

Signed: _____

Print Name: Julie Lawson

Title: Permit Tech II

Date: 4/9/2012

Email julie.lawson@wpenergy.com

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Attachment Check List

Att Doc Num	Name
400269696	FORM 5A SUBMITTED
400269701	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Off Hold. Operator emailed perf interval and 24 hour gas flow.	6/13/2012 3:04:58 PM
Permit	On Hold. Requested verification of perf interval and 24 gas flow.	6/13/2012 2:51:50 PM

Total: 2 comment(s)