

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 47120
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
3. Address: P O BOX 173779 City: DENVER State: CO Zip: 80217-
4. Contact Name: JOEL MALEFYT Phone: (720) 929-6828 Fax: (720) 929-7828

5. API Number 05-123-34047-00
6. County: WELD
7. Well Name: HOWARD Well Number: 9C-29HZ
8. Location: QtrQtr: SWNE Section: 32 Township: 1N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/30/2012 End Date: 05/01/2012 Date of First Production this formation: 05/15/2012

Perforations Top: 8190 Bottom: 12356 No. Holes: Hole size:

Provide a brief summary of the formation treatment: Open Hole: [X]

FRAC'D THROUGH AN OPEN HOLE LINER FROM 8190-12356. AVERAGE TREATING PRESSURE 4688, AVERAGE RATE 57.37, TOTAL BBLs OF FLUID 77385, TOTAL SAND WEIGHT 1907158.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 77385 Max pressure during treatment (psi): 6597

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: Max frac gradient (psi/ft):

Total acid used in treatment (bbl): Number of staged intervals: 20

Recycled water used in treatment (bbl): Flowback volume recovered (bbl):

Fresh water used in treatment (bbl): 66766 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 1907158 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/27/2012 Hours: 24 Bbl oil: 532 Mcf Gas: 699 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 532 Mcf Gas: 699 Bbl H2O: 0 GOR: 1314

Test Method: FLOWING Casing PSI: 1671 Tubing PSI: 1209 Choke Size: 18/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1325 API Gravity Oil: 45

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7862 Tbg setting date: 05/14/2012 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: ** Wireline and Cement Job Summary must be attached.

Comment:

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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: 6/6/2012 Email: JOEL.MALEFYT@ANADARKO.COM
:

Attachment Check List

Att Doc Num	Name
400291918	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)