

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

5. API Number 05-103-11864-00 6. County: RIO BLANCO 7. Well Name: Federal Well Number: RGU 42-25-198 8. Location: QtrQtr: LOT7 Section: 25 Township: 1S Range: 98W Meridian: 6 9. Field Name: SULPHUR CREEK Field Code: 80090

Completed Interval

FORMATION: COZZETTE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/04/2012 End Date: 05/04/2012 Date of First Production this formation: 05/07/2012

Perforations Top: 12027 Bottom: 12046 No. Holes: 5 Hole size: 0.35

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

99.6 GAL 10% HCL; 30750# 30/50 SAND; 5375# 100-MESH SAND; 1285.8 BBLs SLICKWATER

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

Total fluid used in treatment (bbl): 1288 Max pressure during treatment (psi):

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: Max frac gradient (psi/ft): 0.69

Total acid used in treatment (bbl): 2 Number of staged intervals: 1

Recycled water used in treatment (bbl): 1285 Flowback volume recovered (bbl):

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

Total proppant used (lbs): 36125 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: Hours: Bbl oil: Mcf Gas: Bbl H2O:

Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl 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: ** Wireline and Cement Job Summary must be attached.

FORMATION: CORCORAN Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/04/2012 End Date: 05/04/2012 Date of First Production this formation: 05/07/2012
Perforations Top: 12065 Bottom: 12403 No. Holes: 36 Hole size: 0.36

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

648.3 GAL 10% HCL; 169607# 30/50 SAND; 31482# 100-MESH SAND 7105.4 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 7120 Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____ Max frac gradient (psi/ft): 0.59

Total acid used in treatment (bbl): 15 Number of staged intervals: 2

Recycled water used in treatment (bbl): 7105 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE

Total proppant used (lbs): 201089 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl 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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: SEGO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/03/2012 End Date: 05/04/2012 Date of First Production this formation: 05/07/2012
Perforations Top: 12430 Bottom: 12600 No. Holes: 34 Hole size: 0.35

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

646.8 GAL 10% HCL; 154642.8# 30/50 SAND; 27642.8# 100-MESH SAND; 6455.2 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 6470 Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____ Max frac gradient (psi/ft): 0.59

Total acid used in treatment (bbl): 15 Number of staged intervals: 2

Recycled water used in treatment (bbl): 6455 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE

Total proppant used (lbs): 182285 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl 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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/05/2012 End Date: 05/06/2012 Date of First Production this formation: 05/07/2012
Perforations Top: 10137 Bottom: 11599 No. Holes: 118 Hole size: 0.35

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

2538 GAL 10% HCL; 624000# 30/50 SAND; 70600# 100-MESH SAND; 24973.6 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 25034 Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: _____ Max frac gradient (psi/ft): 0.59

Total acid used in treatment (bbl): 60 Number of staged intervals: 5

Recycled water used in treatment (bbl): 24973 Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE

Total proppant used (lbs): 694600 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl 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: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: WILLIAMS FORK-ILES Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/03/2012 End Date: 05/06/2012 Date of First Production this formation: 05/07/2012
 Perforations Top: 10137 Bottom: 12600 No. Holes: 193 Hole size: 0.35

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

3932.7 GAL 10% HCL; 978999.8# 30/50 SAND; 135099.8# 100-MESH SAND; 39820 BBLS SLICKWATER

This formation is commingled with another formation: Yes No
 Total fluid used in treatment (bbl): 39913 Max pressure during treatment (psi): _____
 Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43
 Type of gas used in treatment: _____ Max frac gradient (psi/ft): 0.59
 Total acid used in treatment (bbl): 93 Number of staged intervals: 8
 Recycled water used in treatment (bbl): 39820 Flowback volume recovered (bbl): 16179
 Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE
 Total proppant used (lbs): 1114099 Rule 805 green completion techniques were utilized:
 Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/30/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1949 Bbl H2O: 0
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1949 Bbl H2O: 0 GOR: 0
 Test Method: flowing Casing PSI: 2061 Tubing PSI: 1530 Choke Size: 18/64
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1157 API Gravity Oil: 0
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 12180 Tbg setting date: 05/21/2012 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: _____
 *All flowback water entries are total estimates based on comingled volumes.

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: 8/15/2012 Email julie.lawson@wpenergy.com

Attachment Check List

Att Doc Num	Name
400315885	FORM 5A SUBMITTED
400315893	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)