

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 2286631

Date Received: 01/17/2012

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: 26580 2. Name of Operator: BURLINGTON RESOURCES OIL & GAS LP 3. Address: PO BOX 4289 City: FARMINGTON State: NM Zip: 87499 4. Contact Name: CRYSTAL TAFOYA Phone: (505) 326-9837 Fax: (505) 599-4062

5. API Number 05-067-05819-00 6. County: LA PLATA 7. Well Name: UTE 8. Location: QtrQtr: SWSW Section: 14 Township: 32N Range: 13.5W Meridian: N 9. Field Name: BARKER DOME Field Code: 5260

Completed Interval

FORMATION: HONAKER TRAIL Status: PRODUCING Treatment Type: Treatment Date: 12/02/2010 End Date: Date of First Production this formation: 12/17/2010 Perforations Top: 7958 Bottom: 8295 No. Holes: 74 Hole size: 1/2

Provide a brief summary of the formation treatment:

Open Hole: []

ACIDIZE W/16,800 GALS 15% HCL & 30% N2 FOAM. PUMPED 140 BBLS 2% HCl. ACIDIZE W/16 BBLS 15% HCL. FRAC W/16 BBLS 15% HCL. FRAC W/65 QUALITY FOAM W/30 BPM W/18,790# OF 20/40 BROWN SAND. N2:1,085,800 SCF.

This formation is commingled with another formation: [] Yes [X] 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: Min frac gradient (psi/ft): Total acid used in treatment (bbl): Number of staged intervals: 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: 12/17/2010 Hours: 1 Bbl oil: 0 Mcf Gas: 158 Bbl H2O: 2 Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR: Test Method: Casing PSI: 1435 Tubing PSI: 1356 Choke Size: 1/2 Gas Disposition: VENTED Gas Type: COAL GAS Btu Gas: 1041 API Gravity Oil: 0 Tubing Size: 2 + 7/8 Tubing Setting Depth: 8773 Tbg setting date: 01/06/2011 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:

FORM 5 DOCUMENT #2286632

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

Signed: _____ Print Name: CRYSTAL TAFOYA
Title: STAFF REGULATORY TECH Date: 1/31/2011 Email CRYSTAL.TAFOYA@CONOCOPHILLIPS.CO
:

Attachment Check List

Att Doc Num	Name
2286631	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Requested the date of first production for the Honaker trail	10/26/2012 12:30:43 PM
Permit	Requested formation bottoms from Crystal Tofoya for all supplied formations. Bottoms supplied and shown on form 5 doc 2286632	3/28/2012 12:24:32 PM
Data Entry	CHECK HONAKER TRAIL HOLE SIZE. BTU GAS IS A REQUIRED FIELD IF MCF GAS IS ENTERED.	1/17/2012 1:13:51 PM

Total: 3 comment(s)