

FORM  
5ARev  
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:

2288506

Date Received:

05/07/2012

## 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 4. Contact Name: SANDRA SALAZAR  
 2. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 629-8456  
 3. Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268  
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-19981-00 6. County: GARFIELD  
 7. Well Name: Federal Well Number: SR 434-9  
 8. Location: QtrQtr: NWSE Section: 9 Township: 7S Range: 94W Meridian: 6  
 9. Field Name: RULISON Field Code: 75400

## Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: \_\_\_\_\_  
 Treatment Date: 07/11/2011 End Date: \_\_\_\_\_ Date of First Production this formation: 07/16/2011  
 Perforations Top: 6294 Bottom: 8936 No. Holes: 166 Hole size: 35/100

Provide a brief summary of the formation treatment:

Open Hole: ☐5010 GALS 7.5% HCL; 1488100# OF 20/40 SAND; 42099 BBLS SLICKWATER (SUMMARY).This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 42218

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): 119

Number of staged intervals: \_\_\_\_\_

Recycled water used in treatment (bbl): 42099

Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_

Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): 1488100Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: \_\_\_\_\_

Fracture stimulations must be reported on FracFocus.org

## Test Information:

Date: 08/30/2011 Hours: 24 Bbl oil: 0 Mcf Gas: 1078 Bbl H2O: 0  
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1078 Bbl H2O: 0 GOR: 0  
 Test Method: FLOWING Casing PSI: 2355 Tubing PSI: 1952 Choke Size: 11/64  
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1024 API Gravity Oil: 0  
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 8700 Tbg setting date: 08/14/2011 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 DOC#2288508

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

Signed: \_\_\_\_\_

Print Name: SANDRA SALAZAR

Title: PERMITTING

Date: 4/16/2012

Email sandra.salazar@wpenergy.com

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### Attachment Check List

Att Doc Num	Name
2288506	FORM 5A SUBMITTED
2288507	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold; form 5 approved. frac prior to revised 5A requirements.	2/8/2013 9:14:20 AM
Permit	On Hold pending form 5 approval.	7/9/2012 12:37:50 PM

Total: 2 comment(s)