

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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Date Received:

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: 10084
2. Name of Operator: PIONEER NATURAL RESOURCES USA INC
3. Address: 1401 17TH ST STE 1200
City: DENVER State: CO Zip: 80202
4. Contact Name: Judy Glinisty
Phone: (303) 675-2658
Fax: (303) 294-1275

5. API Number 05-071-07644-00
6. County: LAS ANIMAS
7. Well Name: KILDARE
Well Number: 42-20
8. Location: QtrQtr: SENE Section: 20 Township: 34S Range: 65W Meridian: 6
9. Field Name: PURGATOIRE RIVER Field Code: 70830

Completed Interval

FORMATION: VERMEJO COAL Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 09/05/2002

Perforations Top: 1378 Bottom: 1396 No. Holes: 32 Hole size: 0.48

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

--- TO ABANDON VERMEJO INTERVALS 1478' - 1484' , 1490' - 1494' PER CEMENT RETAINER DESCRIBED BELOW ---

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

Total fluid used in treatment (bbl):
Total gas used in treatment (mcf):
Type of gas used in treatment:
Total acid used in treatment (bbl):
Recycled water used in treatment (bbl):
Fresh water used in treatment (bbl):
Total proppant used (lbs):
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal):
Min frac gradient (psi/ft):
Number of staged intervals:
Flowback volume recovered (bbl):
Disposition method for flowback:
Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/19/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 17 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 17 Bbl H2O: 0 GOR: 0
Test Method: Pumping Casing PSI: 11 Tubing PSI: 0 Choke Size:
Gas Disposition: SOLD Gas Type: COAL GAS Btu Gas: 1005 API Gravity Oil: 0
Tubing Size: 2 + 7/8 Tubing Setting Depth: 1412 Tbg setting date: 01/17/2013 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: [ ] Yes [X] No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 1445 \*\* 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: Bryant Morris

Title: Sr Staff Operations Engr Date: \_\_\_\_\_ Email: Bryant.Morris@pxd.com  
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**Attachment Check List**

**Att Doc Num**      **Name**

400463781	WIRELINE JOB SUMMARY
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Total Attach: 1 Files

**General Comments**

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)