

FORM  
5A

Rev  
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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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: <u>16700</u>	4. Contact Name: <u>Julie Justus</u>
2. Name of Operator: <u>CHEVRON USA INC</u>	Phone: <u>(970) 257-6042</u>
3. Address: <u>6001 BOLLINGER CANYON RD</u>	Fax: <u>(970) 245-6489</u>
City: <u>SAN RAMON</u> State: <u>CA</u> Zip: <u>94583</u>	

5. API Number <u>05-045-15187-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>SKR-598-25-AV</u>	Well Number: <u>11</u>
8. Location: QtrQtr: <u>NENW</u> Section: <u>25</u> Township: <u>5S</u> Range: <u>98W</u> Meridian: <u>6</u>	
9. Field Name: <u>SKINNER RIDGE</u> Field Code: <u>77548</u>	

### Completed Interval

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

Treatment Date: 07/28/2013 End Date: 07/29/2013 Date of First Production this formation: 11/03/2009

Perforations Top: 4064 Bottom: 4530 No. Holes: 54 Hole size: 35/100

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

Pumped 453,810 gallons treated produced water with 284,100 lbs sand.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 10805 Max pressure during treatment (psi): 5707

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 0.75

Total acid used in treatment (bbl): 0 Number of staged intervals: 2

Recycled water used in treatment (bbl): 10805 Flowback volume recovered (bbl): 3194

Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 284100 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: 0 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 0

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

Test Method: 0 Casing PSI: 0 Tubing PSI: 0 Choke Size: 0

Gas Disposition: VENTED Gas Type: DRY Btu Gas: 1068 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5752 Tbg setting date: 08/13/2013 Packer Depth: \_\_\_\_\_

Reason for Non-Production: Not on continuous production: well is being vented/shut-in to unload water head from re-complete. Well has NOT produced a significant recordable amount of gas since stim frac. Currently being shut in prepping for swab runs. Test information will be submitted when available

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: \_\_\_\_\_

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.  
Signed: \_\_\_\_\_ Print Name: Julie Justus  
Title: Regulatory Specialist Date: \_\_\_\_\_ Email: jjustus@chevron.com

### Attachment Check List

Att Doc Num	Name
400468762	WELLBORE DIAGRAM
400474608	COMPLETED INTERVAL REPORT
400474610	COMPLETED INTERVAL REPORT

Total Attach: 3 Files

## General Comments

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

Total: 0 comment(s)