

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: 16700
2. Name of Operator: CHEVRON USA INC
3. Address: 6001 BOLLINGER CANYON RD
City: SAN RAMON State: CA Zip: 94583
4. Contact Name: Lora Brown
Phone: (307) 352-5120
Fax: (307) 352-5180
Email: lorabrown@chevron.com

5. API Number 05-081-06889-00
6. County: MOFFAT
7. Well Name: HIAWATHA
Well Number: B-2
8. Location: QtrQtr: SWSE Section: 13 Township: 12N Range: 101W Meridian: 6
9. Field Name: HIAWATHA WEST Field Code: 34351

Completed Interval

FORMATION: LEWIS Status: INJECTING Treatment Type: ACID JOB

Treatment Date: 08/04/2014 End Date: 08/04/2014 Date of First Production this formation:

Perforations Top: 4866 Bottom: 4948 No. Holes: 65 Hole size: 45/100

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

O PSI on well at start. Pump 55 gal paraffin solvent WLC821. Followed by 5 bbls 3% KCL water. Pump 1500 gal inhibited 15% HCL followed by 20 bbls 3% KCL. Max pressure 1300 PSI. All water pumped at 2 BPM and 850 PSI. Shut in well. and flush with 100 lbs soda ash. ISIP 350 PSI. Well on vacuum in 5 Min. Well is injecting.

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

Total fluid used in treatment (bbl): 1525 Max pressure during treatment (psi): 1300

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): 1500 Number of staged intervals:

Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 0

Fresh water used in treatment (bbl): 25 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: 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.

Comment:

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

Signed: _____ Print Name: Lora Borwn

Title: Regulatory Specialist Date: 8/26/2014 Email: lorabrown@chevron.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400673212	FORM 5A SUBMITTED
400673235	FORM 5A SUBMITTED

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)