<table>
<tr><td>FORM<br>5A<br>Rev<br>06/12</td><td colspan="2">State of Colorado<br>Oil and Gas Conservation Commission<br>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109<br>COMPLETED INTERVAL REPORT</td><td>DE ET OE ES<br>Document Number:<br>400795329<br>Date Received:</td></tr>
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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:     47120

2. Name of Operator:  KERR MCGEE OIL & GAS ONSHORE LP

3. Address:  P O BOX 173779

City:  DENVER     State:  CO     Zip:  80217-

4. Contact Name:    Kayla Hesseltine

Phone:  (720) 929-6552

Fax:

Email:  kayla.hesseltine@anadarko.com

5. API Number    05-123-39688-00

6. County: WELD

7. Well Name:  VOGL STATE     Well Number: 16C-36HZ

8. Location:    QtrQtr:  SWSW     Section:  36     Township:  3N     Range:  68W     Meridian:  6

9. Field Name:  WATTENBERG     Field Code:  90750

## Completed Interval

FORMATION: CODELL-FORT HAYS     Status: PRODUCING     Treatment Type: FRACTURE STIMULATION

Treatment Date:  01/21/2015     End Date:  01/23/2015     Date of First Production this formation:  02/11/2015

Perforations     Top:  7890     Bottom:  12492     No. Holes:  0     Hole size:  0

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

COMPLETED THROUGH AN OPEN HOLE LINER FROM 7890-12492.
86193 BBL SLICKWATER, 86193 BBL TOTAL FLUID.
1163356# 40/70 GENOA/SAND HILLS, 1299186# 40/70 UNIMIN CORP, 2462542# TOTAL SAND.

This formation is commingled with another formation:     ☒ Yes     ☐ No

Total fluid used in treatment (bbl): 86193     Max pressure during treatment (psi): 6295

Total gas used in treatment (mcf): 0     Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment:     Min frac gradient (psi/ft): 0.72

Total acid used in treatment (bbl): 0     Number of staged intervals: 23

Recycled water used in treatment (bbl): 0     Flowback volume recovered (bbl): 3731

Fresh water used in treatment (bbl): 86193     Disposition method for flowback:  DISPOSAL

Total proppant used (lbs): 2462542     Rule 805 green completion techniques were utilized:  ☒

Reason why green completion not utilized:

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date:  02/19/2015     Hours:  24     Bbl oil:  340     Mcf Gas:  1160     Bbl H2O:  339

Calculated 24 hour rate:     Bbl oil:  340     Mcf Gas:  1160     Bbl H2O:  339     GOR:  3411

Test Method: FLOWING     Casing PSI:  800     Tubing PSI:     Choke Size:  14/64

Gas Disposition:  SOLD     Gas Type:  WET     Btu Gas:  1240     API Gravity Oil:  52

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.

FORMATION: CODELL    Status: COMMINGLED    Treatment Type: _____

Treatment Date: _____    End Date: _____    Date of First Production this formation: _____

Perforations    Top: 7795    Bottom: 12492    No. Holes: 0    Hole size: _____

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

This formation is commingled with another formation:    ☒ Yes    ☐ 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: _____    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.

FORMATION: FORT HAYS                    Status: COMMINGLED                    Treatment Type: _____

Treatment Date: _____          End Date: _____          Date of First Production this formation: _____

Perforations          Top: 7680          Bottom: 7795          No. Holes: 0          Hole size: _____

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

This formation is commingled with another formation:          ☒ Yes          ☐ 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: _____          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: Kayla Hesseltine

Title: Regulatory Specialist          Date: _____          Email: kayla.hesseltine@anadarko.com

# Attachment Check List

**Att Doc Num**          **Name**

Total Attach: 0 Files

# General Comments

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

Total: 0 comment(s)