

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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Document Number:

400867618

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: 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 05-123-40406-00

7. Well Name: COBRA

6. County: WELD

Well Number: 30C-14HZ

8. Location: QtrQtr: NWSW Section: 23 Township: 2N Range: 67W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

## Completed Interval

FORMATION: CODELL-CARLILE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/27/2015 End Date: 07/04/2015 Date of First Production this formation: 07/11/2015  
Perforations Top: 8527 Bottom: 13506 No. Holes: 600 Hole size: 0.46

Provide a brief summary of the formation treatment:

Open Hole: ☐

PERF AND FRAC FROM 8527-13,506.  
131 BBL ACID, 137,973 BBL SLICKWATER, 3,179 BBL WATER, 141,282 BBL TOTAL FLUID.  
8,991,150# 100 MESH OTTAWA/ST. PETERS, 8,991,150# TOTAL SAND.

ENTERED CODELL 8390-8953, 9178-11349, 12148-12283, 12324-13583,  
CARLILE 8953-9178, 11349-12148, 12283-12324.  
THIS IS A DESIGNATED SOURCE OF SUPPLY WELL. (SEE ATTACHMENT)

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

Total fluid used in treatment (bbl): 141282

Max pressure during treatment (psi): 8435

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): 0.82

Total acid used in treatment (bbl): 131

Number of staged intervals: 25

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 7526

Fresh water used in treatment (bbl): 141151

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 8991150

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

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

### Test Information:

Date: 07/24/2015 Hours: 24 Bbl oil: 124 Mcf Gas: 207 Bbl H2O: 520  
Calculated 24 hour rate: Bbl oil: 124 Mcf Gas: 207 Bbl H2O: 520 GOR: 1669  
Test Method: FLOWING Casing PSI: 1350 Tubing PSI: Choke Size: 14/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1310 API Gravity Oil: 50  
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**

400868148 OTHER

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)