

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES.

Document Number: 402078591

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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: 100 CHEVRON USA INC
City: RANGELY State: CO Zip: 81648
4. Contact Name: ANITA SANFORD
Phone: (970) 675-3842
Fax:
Email: AT LX@CHEVRON.COM

5. API Number 05-103-09206-00
6. County: RIO BLANCO
7. Well Name: WALBRIDGE UNIT
Well Number: 3X
8. Location: QtrQtr: NENW Section: 1 Township: 1N Range: 102W Meridian: 6
9. Field Name: RANGELY Field Code: 72370

Completed Interval

FORMATION: WEBER Status: TEMPORARILY ABANDONED Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 04/24/1985
Perforations Top: 6004 Bottom: 6400 No. Holes: 62 Hole size: 1/2

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

TUBING PLUG WAS SET AT 5943' ON 06/13/2019.

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: 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: 2 + 7/8 Tubing Setting Depth: 5934 Tbg setting date: 06/13/2019 Packer Depth: 5943

Reason for Non-Production: IT IS UNECONOMICAL TO RETURN THIS WELL TO SERVICE AT CURRENT OIL PRICE.

Date formation Abandoned: 06/13/2019 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:

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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: ANITA SANFORD

Title: REGULATORY TECH.ASSISTANT Date: 6/18/2019 Email ATLX@CHEVRON.COM
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402078591	FORM 5A SUBMITTED
402079728	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)