

FORM
5A

Rev
02/08

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

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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: 56565
2. Name of Operator: MERIT ENERGY COMPANY
3. Address: 13727 NOEL ROAD STE 500
City: DALLAS State: TX Zip: 75240
4. Contact Name: Arlene Valliquette
Phone: (972) 628-1558
Fax: (972) 628-1858

5. API Number 05-123-29053-00
6. County: WELD
7. Well Name: ADAMSON Well Number: 5
8. Location: QtrQtr: NWSW Section: 28 Township: 5N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: TEMPORARILY ABANDONED

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

Perforations Top: 6929 Bottom: 6945 No. Holes: 96 Hole size: 0.4

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

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls 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:

Temporarily abandoned to test Niobrara formation

Date formation Abandoned: 01/17/2011 Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: 6910 Sacks cement on top: 2

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 01/21/2011 Date of First Production this formation: 01/22/2011
Perforations Top: 6643 Bottom: 6838 No. Holes: 330 Hole size: 0.4

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

Frac'd Niobrara perforations with 4264 bbls Silverstim plus 240,100# of Ottawa 30/50 sand & 24,060# of Ottawa 40/70 sand.

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/14/2011 Hours: 24 Bbls oil: 35 Mcf Gas: 164 Bbls H2O: 29
Calculated 24 hour rate: Bbls oil: 35 Mcf Gas: 164 Bbls H2O: 29 GOR: 4686
Test Method: Flowing Casing PSI: 520 Tubing PSI: 160 Choke Size: _____
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1405 API Gravity Oil: 55
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6629 Tbg setting date: 02/11/2011 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: _____

Comment:

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

Signed: _____ Print Name: Arlene Valliquette

Title: Regulatory Manager Date: _____ Email arlene.valliquette@meritenergy.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)