IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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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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: 76840
2. Name of Operator: SCHNEIDER ENERGY SERVICES INC
3. Address: P O BOX 297
City: FORT MORGAN State: CO Zip: 80701
4. Contact Name: JEFF SCHNEIDER
Phone: (970) 867-9437
Fax: (970) 867-9137

5. API Number 05-121-10996-00
6. County: WASHINGTON
7. Well Name: DUNN
Well Number: 10-22A
8. Location: QtrQtr: SENW Section: 10 Township: 2S Range: 50W Meridian: 6
9. Field Name: WHITE EAGLE Field Code: 92798

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 04/27/2010 Date of First Production this formation: 09/03/2010

Perforations Top: 2990 Bottom: 300 No. Holes: 84 Hole size: 3/8

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

MIXED AND PUMPED 100,000# OF 16/30 SANDW/ 60 TONS CO2, IN 635 BBLS H2O IN A GEL CARRIER.

This formation is commingled with another formation: Yes No

Test Information:

Date: 07/29/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 43 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 43 Bbls H2O: 0 GOR: 1

Test Method: FLOWING Casing PSI: 720 Tubing PSI: Choke Size: 8/64

Gas Disposition: VENTED Gas Type: WET BTU Gas: 980 API Gravity Oil: 0

Tubing Size: 4 + 1/2 Tubing Setting Depth: 3155 Tbg setting date: 07/21/2008 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: KIRK WILLIAMS

Title: WSS Date: 9/14/2010 Email: K.WILLIAMS@SCHNEIDERENERGY.COM