

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		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
COMPLETED INTERVAL REPORT			Document Number: <div style="text-align: center; font-weight: bold;">2591824</div>				
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: <u>8960</u>	4. Contact Name: <u>KERRY MCCOWEN</u>
2. Name of Operator: <u>BONANZA CREEK ENERGY OPERATING COMPAN</u>	Phone: <u>(720) 279-2330</u>
3. Address: <u>P O BOX 21974</u>	Fax: <u>(720) 279-2331</u>
City: <u>BAKERSFIELD</u> State: <u>CA</u> Zip: <u>93390</u>	

5. API Number <u>05-123-31830-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Antelope</u>	Well Number: <u>18C</u>
8. Location: QtrQtr: <u>NESW</u> Section: <u>18</u> Township: <u>5N</u> Range: <u>62W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: <u>NIOBRARA-CODELL</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>10/23/2010</u>	Date of First Production this formation: <u>11/16/2010</u>
Perforations Top: <u>6234</u> Bottom: <u>6494</u>	No. Holes: <u>100</u> Hole size: <u>40/100</u>
Provide a brief summary of the formation treatment: _____ Open Hole: <input type="checkbox"/>	
CODL PUMPED 32004 GAL FLUID AND 99960 GAL PHASERFRAC WITH 246220 LBS 20/40 SAND. ISDP 3076 PSI; ATR 22.3 BPM; ATP 3566 PSI. NBRR PUMPED 20496 GAL PAD FLUID AND 111132 PHASERFRAC WITH 261040 LBS 30/50 SAND. ISDP 3075 PSI; ATR 50.1 BRM; ATP 3908 PSI.	
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Test Information:	
Date: <u>10/07/2010</u> Hours: <u>24</u>	Bbls oil: <u>58</u> Mcf Gas: <u>50</u> Bbls H2O: <u>22</u>
Calculated 24 hour rate: _____	Bbls oil: <u>58</u> Mcf Gas: <u>50</u> Bbls H2O: <u>22</u> GOR: _____
Test Method: <u>FLOWING</u>	Casing PSI: _____ Tubing PSI: <u>450</u> Choke Size: _____
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u> BTU Gas: <u>1300</u> API Gravity Oil: <u>42</u>
Tubing Size: _____ Tubing Setting Depth: _____	Tbg setting date: _____ Packer Depth: _____
Reason for Non-Production: _____ <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____	
Bridge Plug Depth: _____ Sacks cement on top: _____	

Comment:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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

Signed: _____ Print Name: KERRY A MCCOWEN

Title: V.P. OPERATIONS Date: 12/15/2010 Email KAM@BONANZACRK.COM
:

Attachment Check List

Att Doc Num	Name
2591824	FORM 5A SUBMITTED
2591825	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)