


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> Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center;">2590718</div>	DE	ET	OE	ES
DE	ET	OE	ES				
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: <u>10326</u>		4. Contact Name: <u>FABRIANNA VENADUCCI</u>					
2. Name of Operator: <u>ESENJAY OPERATING INC</u>		Phone: <u>(303) 279-0789</u>					
3. Address: <u>500 N. WATER STREET - STE 1100S</u>		Fax: <u>(303) 279-1124</u>					
City: <u>CORPUS CHRISTI</u> State: <u>TX</u> Zip: <u>78471</u>							
5. API Number <u>05-087-08155-00</u>		6. County: <u>MORGAN</u>					
7. Well Name: <u>Kross</u>		Well Number: <u>8-12</u>					
8. Location: QtrQtr: <u>NWSW</u> Section: <u>8</u> Township: <u>6N</u> Range: <u>59W</u> Meridian: <u>6</u>							
9. Field Name: <u>WILDCAT</u>		Field Code: <u>99999</u>					
<u>Completed Interval</u>							
FORMATION: <u>D SAND</u>		Status: <u>SHUT IN</u>					
Treatment Date: _____		Date of First Production this formation: _____					
Perforations Top: <u>6624</u>	Bottom: <u>6652</u>	No. Holes: <u>112</u>	Hole size: <u>21/50</u>				
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
<div style="border: 1px solid black; padding: 2px;">NA</div>							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Test Information:							
Date: <u>09/08/2010</u>	Hours: <u>5</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>0</u>				
Calculated 24 hour rate:		Bbls oil: <u>2</u>	Mcf Gas: <u>0</u>				
Test Method: <u>SWAB</u>		Casing PSI: <u>130</u>	Tubing PSI: _____				
Gas Disposition: <u>VENTED</u>		Gas Type: <u>WET</u>	BTU Gas: <u>0</u>				
Tubing Size: <u>2 + 7/8</u>		Tubing Setting Depth: <u>6652</u>	Tbg setting date: <u>09/08/2010</u>				
Reason for Non-Production:		Packer Depth: _____					
<div style="border: 1px solid black; padding: 2px;">UNECONOMIC</div>							
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Bridge Plug Depth: _____		If yes, number of sacks cmt _____					
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: <u>FABRIANNA VENADUCCI</u>					
Title: <u>LANDMAN</u>	Date: <u>11/5/2010</u>	Email <u>FABRIANNA@JAMESKARO.COM</u>					

Attachment Check List

Att Doc Num	Name
2590718	FORM 5A SUBMITTED
2590719	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	On hold-well was permitted for the J-sand. Why are they testing the D sand	5/31/2011 10:43:07 AM

Total: 1 comment(s)