


<b>FORM 5A</b>  Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 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="text-align: center; font-weight: bold;">1635614</div>	DE	ET	OE	ES				
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<b>COMPLETED INTERVAL REPORT</b>											
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.											
<table style="width: 100%;"> <tr> <td style="width: 50%;">1. OGCC Operator Number: <u>8960</u></td> <td style="width: 50%;">4. Contact Name: <u>KERRY MCCOWEN</u></td> </tr> <tr> <td>2. Name of Operator: <u>BONANZA CREEK ENERGY OPERATING COMPAN</u></td> <td>Phone: <u>(720) 440-6100</u></td> </tr> <tr> <td>3. Address: <u>P O BOX 21974</u></td> <td>Fax: <u>(720) 279-2331</u></td> </tr> <tr> <td>City: <u>BAKERSFIELD</u> State: <u>CA</u> Zip: <u>93390</u></td> <td></td> </tr> </table>				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) 440-6100</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>	
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Provide a brief summary of the formation treatment: _____ Open Hole: <input type="checkbox"/>											
<div style="border: 1px solid black; padding: 5px;">         CODL PUMPED 32,016 GAL PAD FLUID. PUMP 98,099 GAL PHASERFRAC W/245,780 LS OF 20/40 SAND. ISDP 3029 PSI. ATR 22.9 BPM. ATP 3468 PSI. NBRR PUMPED 28,266 GAL PAD FLUID. PUMP 110,628 GAL PHASER FRAC W/260,040 LBS. 30/50 SAND. ISDP 3147 PSI. ATR 52.7 BPM, ATP 3927 PSI.       </div>											
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
<b>Test Information:</b>											
<table style="width: 100%;"> <tr> <td style="width: 20%;">Date: <u>03/25/2011</u></td> <td style="width: 10%;">Hours: <u>24</u></td> <td style="width: 10%;">Bbls oil: <u>17</u></td> <td style="width: 10%;">Mcf Gas: <u>13</u></td> <td style="width: 10%;">Bbls H2O: <u>8</u></td> </tr> </table>				Date: <u>03/25/2011</u>	Hours: <u>24</u>	Bbls oil: <u>17</u>	Mcf Gas: <u>13</u>	Bbls H2O: <u>8</u>			
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Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>											

**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: VP OPERATIONS Date: 4/19/2011 Email KAM@BONANZACRK.COM  
:

### **Attachment Check List**

Att Doc Num	Name
1635614	FORM 5A SUBMITTED
1635615	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

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

Total: 0 comment(s)