

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:

400158082

**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: 10332 4. Contact Name: Danielle Gavito  
2. Name of Operator: PATARA OIL & GAS LLC Phone: (303) 820-4480  
3. Address: 333 CLAY STREET, STE #3960 Fax: (303) 820-4124  
City: HOUSTON State: TX Zip: 77002

5. API Number 05-113-06215-00 6. County: SAN MIGUEL  
7. Well Name: HC FED Well Number: 1-13-44-15  
8. Location: QtrQtr: SWSE Section: 36 Township: 45N Range: 15W Meridian: N  
9. Field Name: HAMILTON CREEK Field Code: 33540

Completed Interval

FORMATION: HONAKER TRAIL Status: PRODUCING  
Treatment Date: 04/03/2011 Date of First Production this formation: 04/05/2011  
Perforations Top: 6694 Bottom: 7002 No. Holes: 321 Hole size: 3/8  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☒  
This formation is commingled with another formation: ☐ Yes ☒ No  
**Test Information:**  
Date: 04/10/2011 Hours: 24 Bbls oil: 25 Mcf Gas: 4000 Bbls H2O: 36  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 25 Mcf Gas: 4000 Bbls H2O: 36 GOR: \_\_\_\_\_  
Test Method: Flowing Casing PSI: 700 Tubing PSI: \_\_\_\_\_ Choke Size: 38/64  
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 979 API Gravity Oil: 51  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 6614 Tbg setting date: 04/20/2011 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:

Please send copies of all correspondence to Danielle Gavito or David Bank at 385 Inverness Parkway, Suite 420, Englewood, CO 80202 or to danielle@banko1.com or dave@banko1.com resctively. Thank you.

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

Signed: \_\_\_\_\_ Print Name: Kimberly Rodell  
Title: Permit Agent Date: 5/20/2011 Email kim@banko1.com

### Attachment Check List

| Att Doc Num | Name                 |
|-------------|----------------------|
| 400158082   | FORM 5A SUBMITTED    |
| 400160866   | WIRELINE JOB SUMMARY |
| 400167478   | OTHER                |
| 400167533   | WELLBORE DIAGRAM     |

Total Attach: 4 Files

### General Comments

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

Total: 0 comment(s)