


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																					
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COMPLETED INTERVAL REPORT			Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center;">400174993</div>																									
<p>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.</p>																												
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Re-Perf Codell 6743-6751 (24 new holes) Original perf 6743-6751' (24 holes) Re-Frac'd Codell w/ 120 bbl Active Pad, 596 bbls of 26# pHaser pad, 2068 bbls of 26# pHaser, 217460# 20/40 , 8000 lbs 20/40 SB Excel																												
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																												
Test Information:																												
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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: _____																												

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION:	NIOBRARA-CODELL				Status:	PRODUCING					
Treatment Date:				Date of First Production this formation:	05/18/2011						
Perforations	Top:	6478	Bottom:	6751	No. Holes:	82	Hole size:				
Provide a brief summary of the formation treatment:				Open Hole: <input type="checkbox"/>							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
Test Information:											
Date:	05/31/2011	Hours:	24	Bbls oil:	62	Mcf Gas:	174	Bbls H2O:	19		
Calculated 24 hour rate:		Bbls oil:	62	Mcf Gas:	174	Bbls H2O:	19	GOR:	2807		
Test Method:	Flowing	Casing PSI:	550	Tubing PSI:		Choke Size:	16/64				
Gas Disposition:	SOLD	Gas Type:	WET	BTU Gas:	1236	API Gravity Oil:	46				
Tubing Size:	2 + 3/8	Tubing Setting Depth:	6728	Tbg setting date:	06/16/2011	Packer Depth:					
Reason for Non-Production:											
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:							

FORMATION:	NIOBRARA				Status:	COMMINGLED					
Treatment Date:	05/10/2011			Date of First Production this formation:							
Perforations	Top:	6478	Bottom:	6583	No. Holes:	28	Hole size:				
Provide a brief summary of the formation treatment:				Open Hole: <input type="checkbox"/>							
Perf Niobrara "A" 6478-6480' (4 holes), Niobrara "B" 6575-6583' (24 holes) Frac'd Niobrara W/ , 120 bbl FE-1A pad, 1549 bbls of slickwater pad, 146 bbls of pHaser 20# pad, 2216 bbls 20# pHaser, 238580# 20/40 Prefer'd Rock, 12,000# 20/40 SB Excel											
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
Test Information:											
Date:		Hours:		Bbls oil:		Mcf Gas:		Bbls H2O:			
Calculated 24 hour rate:		Bbls oil:		Mcf Gas:		Bbls H2O:		GOR:			
Test Method:		Casing PSI:		Tubing PSI:		Choke Size:					
Gas Disposition:		Gas Type:		BTU Gas:		API Gravity Oil:					
Tubing Size:		Tubing Setting Depth:		Tbg setting date:		Packer Depth:					
Reason for Non-Production:											
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: Jeff Glossa

Title: Sr Engineering Tech Date: 7/6/2011 Email jglossa@petd.com
:

Attachment Check List

Att Doc Num	Name
400174993	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)