

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 with columns DE, ET, OE, ES

Document Number: 2072441

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: 66190
2. Name of Operator: OMIMEX PETROLEUM INC
3. Address: 2001 BEACH ST STE 810
City: FORT WORTH State: TX Zip: 76103
4. Contact Name: JASON ALLEY
Phone: (817) 870-2921
Fax:

5. API Number 05-095-06286-00
6. County: PHILLIPS
7. Well Name: Lindgren
Well Number: 3-30-7-44
8. Location: QtrQtr: NENW Section: 30 Township: 7N Range: 44W Meridian: 6
9. Field Name: HOLYOKE SOUTH Field Code: 36650

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 11/09/2010 Date of First Production this formation: 12/10/2010

Perforations Top: 2510 Bottom: 2546 No. Holes: 72 Hole size: 36/100

Provide a brief summary of the formation treatment: Open Hole: [ ]

MIRU WITH MAVERICK AND PRESSURE TEST TO 2700 PSI AND BEGIN PUMPING IN ACID AND PAD. FRACTURE BREAKDOWN @ 861 PSI. PUMPED 64960#S 16/30 AZ. ISIP = 1996 PSI

This formation is commingled with another formation: [ ] Yes [X] No

Test Information:

Date: 12/10/2010 Hours: 9 Bbls oil: 0 Mcf Gas: 21 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: Mcf Gas: 56 Bbls H2O: GOR:

Test Method: FLOW Casing PSI: 256 Tubing PSI: Choke Size: 75/100

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 985 API Gravity Oil: 0

Tubing Size: Tubing Setting Depth: Tbg setting date: 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:

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

Signed: Print Name: JASON ALLEY

Title: PETROLEUM ENG TECH Date: 1/21/2011 Email: JASON\_ALLEY@OMIMEX.COM

### Attachment Check List

Att Doc Num	Name
2072441	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)