

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

COMPLETED INTERVAL REPORT

Document Number: 400135905

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: 57667
2. Name of Operator: MINERAL RESOURCES, INC.
3. Address: PO BOX 328
City: GREELEY State: CO Zip: 80632
4. Contact Name: CLAYTON DOKE
Phone: (970) 669-7411
Fax: (970) 669-4077

5. API Number 05-123-25897-00
6. County: WELD
7. Well Name: BALLFIELD Y6
Well Number: 7-7-31
8. Location: QtrQtr: SENW Section: 31 Township: 5N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 11/13/2010 Date of First Production this formation:
Perforations Top: 7887 Bottom: 7897 No. Holes: 40 Hole size: 4/10

Provide a brief summary of the formation treatment: Open Hole:
Frac'd CODL w/ 22,037 gal pHaserFrac, 97,043 gal FW (83,000 gal SLF) & 250,200# 30/50. ATP= 5242 psi, ATR= 47.4 BPM. TP,max= 5844 psi, TR,max= 50.8 BPM.

This formation is commingled with another formation: [X] Yes [ ] 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: [ ] Yes [ ] No If yes, number of sacks cmt
Bridge Plug Depth: Sacks cement on top:

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: \_\_\_\_\_ Date of First Production this formation: 12/01/2010

Perforations Top: 7596 Bottom: 7897 No. Holes: 88 Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 12/16/2010 Hours: 24 Bbls oil: 86 Mcf Gas: 574 Bbls H2O: 0

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 86 Mcf Gas: 574 Bbls H2O: 0 GOR: 6674

Test Method: FLOWING Casing PSI: 1050 Tubing PSI: \_\_\_\_\_ Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1264 API Gravity Oil: 58

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: \_\_\_\_\_

FORMATION: NIOBRARA Status: COMMINGLED

Treatment Date: 11/13/2010 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 7596 Bottom: 7658 No. Holes: 48 Hole size: 21/50

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Frac'd NBRR "A" (7596'-7602') & NBRR "B" (7652'-7658') w/ 115,487 gal pHaserFrac, 96,084 gal FW (191,365 gal SLF) & 294,400# 30/50. ATP= 5174 psi, ATR= 54.0 BPM. TP,max= 5440 psi, TR,max= 57.6 BPM.

This formation is commingled with another formation:  Yes  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:  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: CLAYTON DOKE

Title: ENGINEER Date: 9/29/2011 Email: cdoke@petersonenergy.com

### Attachment Check List

Att Doc Num	Name
400135905	FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

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

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