

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:

400168679

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: 10276

2. Name of Operator: PINE RIDGE OIL & GAS LLC

3. Address: 600 17TH ST STE 800S

City: DENVER State: CO Zip: 80202

4. Contact Name: Paul Gottlob

Phone: (303) 226-1316

Fax: (303) 226-1301

5. API Number 05-043-06203-00

7. Well Name: Triggerfish

6. County: FREMONT

Well Number: 22-31

8. Location: QtrQtr: SENW Section: 31 Township: 19S Range: 69W Meridian: 6

9. Field Name: FLORENCE-CANON CITY Field Code: 24600

Completed Interval

FORMATION: PIERRE

Status: PRODUCING

Treatment Date: Date of First Production this formation: 05/13/2011

Perforations Top: 3641 Bottom: 4395 No. Holes: 0 Hole size:

Provide a brief summary of the formation treatment: Open Hole: ☐

We did not perforate or do a completion treatment on this well.

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: 2 + 7/8 Tubing Setting Depth: 4285 Tbg setting date: 05/07/2011 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:

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

Signed: Print Name: Paul Gottlob

Title: Sr. Engineering Tech. Date: 9/19/2011 Email: paul.gottlob@cometridgeresources.com

Attachment Check List

Att Doc Num	Name
400168679	COMPLETED INTERVAL REPORT
400206411	WELLBORE DIAGRAM
400217397	FORM 5A SUBMITTED

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	PER P.G. @PINERIDGE THERE WAS NO TESTING DONE ON THIS WELL, THEY DO NOT TEST ANY OF THEIR WELLS	10/27/2011 10:09:25 AM

Total: 1 comment(s)