

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

COMPLETED INTERVAL REPORT

Document Number: 400223860

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: 90950
2. Name of Operator: UNIOIL
3. Address: 1775 SHERMAN ST STE 3000
City: DENVER State: CO Zip: 80203
4. Contact Name: Jeff Glossa
Phone: (303) 831-3972
Fax: (303) 860-5838

5. API Number 05-123-11595-00
6. County: WELD
7. Well Name: BEEBE DRAW
Well Number: 1
8. Location: QtrQtr: NWSW Section: 25 Township: 4N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED
Treatment Date: 09/22/2005 Date of First Production this formation:
Perforations Top: 7072 Bottom: 7082 No. Holes: 40 Hole size: 3/8
Provide a brief summary of the formation treatment: Open Hole:
frac with 3132 bbl 22 & 20# Vistar crosslink gel, 245,740# 20/40 sand
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: 08/23/2005

Perforations Top: 6804 Bottom: 7082 No. Holes: 48 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: 10/31/2005 Hours: 24 Bbls oil: 3 Mcf Gas: 173 Bbls H2O: 11

Calculated 24 hour rate: _____ Bbls oil: 3 Mcf Gas: 173 Bbls H2O: 11 GOR: 57806

Test Method: flowing Casing PSI: 270 Tubing PSI: 270 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1235 API Gravity Oil: 59

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: 08/22/2005 Date of First Production this formation: _____

Perforations Top: 6804 Bottom: 7004 No. Holes: 8 Hole size: 3/8

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

frac with 3132 bbl 22 & 20# Vistar crosslink gel, 245,740# 20/40 sand (frac with codell)

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: Jeff Glossa

Title: Sr Engineering Tech Date: 11/15/2011 Email: jglossa@petd.com

Attachment Check List

Att Doc Num	Name
2072810	OTHER
400223860	FORM 5A SUBMITTED

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	REC TEST INFO SEE DOC#2072810, ATTACHMENT	11/16/2011 3:32:22 PM
Permit	req test info	11/16/2011 9:32:36 AM

Total: 2 comment(s)