

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:

2285211

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: 10221

4. Contact Name: KENT KEPPEL

2. Name of Operator: RUNNING FOXES PETROLEUM INC

Phone: (720) 889-0510

3. Address: 6855 S. HAVANA ST #400

Fax: (303) 617-7442

City: CENTENNIAL State: CO Zip: 80112

5. API Number 05-073-06321-00

6. County: LINCOLN

7. Well Name: JOLLY RANCH

Well Number: 10-5

8. Location: QtrQtr: NWSE Section: 5 Township: 13S

Range: 55W Meridian: 6

9. Field Name: JOLLY RANCH Field Code: 42640

### Completed Interval

FORMATION: CHEROKEE Status: TEMPORARILY ABANDONED

Treatment Date: 04/23/2010 Date of First Production this formation: \_\_\_\_\_  
Perforations Top: 6800 Bottom: 6802 No. Holes: 6 Hole size: 40/100

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

ACIDIZE W/1500 GALS 15% HCL

This formation is commingled with another formation: ☐ Yes ☒ No

#### Test Information:

Date: 04/26/2010 Hours: 8 Bbls oil: 1 Mcf Gas: 0 Bbls H2O: 80  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 2 Mcf Gas: 0 Bbls H2O: 240 GOR: 0  
Test Method: pumping Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: 0 API Gravity Oil: 1  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6800 Tbg setting date: 04/24/2010 Packer Depth: \_\_\_\_\_

Reason for Non-Production: \_\_\_\_\_

FORMATION WAS WET.

Date formation Abandoned: \_\_\_\_\_ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 6680 Sacks cement on top: 0

FORMATION: MARMATON Status: PRODUCING

Treatment Date: 05/13/2010 Date of First Production this formation: 06/01/2010  
Perforations Top: 6601 Bottom: 6605 No. Holes: 12 Hole size: 40/100

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

AACIDIZE W/2000 GALS 15% HCL

This formation is commingled with another formation: ☐ Yes ☒ No

#### Test Information:

Date: 05/11/2010 Hours: 8 Bbls oil: 3 Mcf Gas: 0 Bbls H2O: 80  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 10 Mcf Gas: 0 Bbls H2O: 240 GOR: 0  
Test Method: pumping Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: 0 API Gravity Oil: 37  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6583 Tbg setting date: 05/18/2010 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: ROLANDO D. BENAVIDES

Title: ENGINEER Date: 10/13/2011 R.BENAVIDES@RUNNINGFOXES.COM

Email  
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### **Attachment Check List**

Att Doc Num	Name
2285211	FORM 5A SUBMITTED
2285212	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Data Entry	CHEROKEE FORMATION: API GRAVITY ENTERED SINCE BBLS OIL ENTERED.	11/18/2011 11:42:22 AM

Total: 1 comment(s)