

**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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## 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: 68710

4. Contact Name: CLAYTON DOKE

2. Name of Operator: PETERSON ENERGY OPERATING INC

Phone: (970) 669-7411

3. Address: 2154 W EISENHOWER BLVD

Fax: (970) 669-4077

City: LOVELAND State: CO Zip: 80537

5. API Number            05-123-34000-00

6. County: WELD

7. Well Name: 392 VENTURES

Well Number: 22CD

8. Location: QtrQtr: SENW Section: 22 Township: 6N Range: 67W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: CODELL

Status: PRODUCING

Treatment Date: 02/29/2012

Date of First Production this formation: 03/21/2012

Perforations	Top:	7416	Bottom:	7428	No. Holes:	48	Hole size:	042/100
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Provide a brief summary of the formation treatment:

Open Hole: 

151,074 gal slickwater with 30/50 sand

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

**Test Information:**

Date:	03/21/2012	Hours:	24	Bbls oil:	10	Mcf Gas:	1	Bbls H2O:	0
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Calculated 24 hour rate:	Bbls oil:	10	Mcf Gas:	1	Bbls H2O:	0	GOR:	60
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Test Method: Flowing	Casing PSI: 1600	Tubing PSI:	Choke Size: 06/64
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Gas Disposition:	SOLD	Gas Type:	WET	BTU Gas:	1284	API Gravity Oil:	43
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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: PETROLEUM ENGINEER                      Date:                      Email: cdoke@petersonenergy.com

### Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

### General Comments

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

Total: 0 comment(s)