

FORM  
5A

Rev  
02/08

State of Colorado

Oil and Gas Conservation Commission

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400288129

Date Received:

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: 10051

4. Contact Name: TANYA CARPIO

2. Name of Operator: APOLLO OPERATING LLC

Phone: (303) 830-0888 X.201

3. Address: 1538 WAZEE ST STE 200

Fax: (303) 830.2818

City: DENVER State: CO Zip: 80202

5. API Number 05-123-33659-00

6. County: WELD

7. Well Name: E.L. MINCH

Well Number: 35-4D

8. Location: QtrQtr: SESW Section: 4 Township: 3N

Range: 68W Meridian: 6

9. Field Name: WATTENBERG

Field Code: 90750

### Completed Interval

FORMATION: CODELL

Status: SHUT IN

Treatment Date: 05/04/2012

Date of First Production this formation: 05/04/2012

Perforations Top: 7472 Bottom: 7496 No. Holes: 96 Hole size: 41/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

TREATED WITH 817 BBLS PAD, 4198 BBLS SLF (SLICK WATER), AND 90,460 LBS OF 30/50 WHITE SAND, FLUSHED WITH 300 BBLS SLICK WATER, AVERAGE PRESSURE=4267 PSI, MAX PRESSURE=5134 PSI, AR=61.2 BPM, MAX RATE=62.9 BPM

This formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**

Date: 05/05/2012 Hours: 22 Bbls oil: 5 Mcf Gas: 150 Bbls H2O: 21

Calculated 24 hour rate: Bbls oil: 130 Mcf Gas: 200 Bbls H2O: GOR: 1538

Test Method: FLOWING Casing PSI: 1300 Tubing PSI: Choke Size: 12/64

Gas Disposition: VENTED Gas Type: DRY BTU Gas: API Gravity Oil: 45

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: SHUT IN

Treatment Date: 05/09/2012

Date of First Production this formation: 05/09/2012

Perforations Top: 7266 Bottom: 7344 No. Holes: 92 Hole size: 41/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

TREATED WITH 792 BBLS PAD, 1000 GALLONS 15% HCL ACID, 4148 BBLS SLF (SLICK WATER) AND 91,520 LBS 30/50 WHITE SAND, FLUSH WITH 300 BBLS WATER, AVERAGE PRESSURE=4374 PSI, MAX PRESSURE=5302 PSI, AR=61.6 BPM, MAX RATE=62.2 BPM.

This formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**

Date: 05/10/2012 Hours: 16 Bbls oil: 3 Mcf Gas: 90 Bbls H2O: 15

Calculated 24 hour rate: Bbls oil: 69 Mcf Gas: 105 Bbls H2O: GOR: 1521

Test Method: FLOWING Casing PSI: 1300 Tubing PSI: Choke Size: 12/64

Gas Disposition: VENTED Gas Type: DRY BTU Gas: API Gravity Oil: 45

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: TANYA CARPIO

Title: OFFICE MANAGER

Date:

Email TCARPIO@APOLLOOPERATING.COM

:

### Attachment Check List

Att Doc Num	Name
400290845	WELLBORE DIAGRAM

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)