

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 10299
2. Name of Operator: KUENZLER & FLORA RESERVE COMPANY
3. Address: 3310 W AQUEDUCT AVE
City: LITTLETON State: CO Zip: 80123
4. Contact Name: Jake Flora
Phone: (720) 988-5375
Fax:

5. API Number 05-017-07533-00
6. County: CHEYENNE
7. Well Name: RED LADY
Well Number: 1-36
8. Location: QtrQtr: NENE Section: 36 Township: 12S Range: 46W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: SHAWNEE Status: PRODUCING Treatment Type: ACID JOB

Treatment Date: 03/29/2012 End Date: 03/29/2012 Date of First Production this formation: 05/10/2012

Perforations Top: Bottom: No. Holes: 16 Hole size:

Provide a brief summary of the formation treatment: Open Hole: [ ]

Pumped 500 gal 15% HCL, displaced with KCL water

This formation is commingled with another formation: [ ] Yes [X] No

Total fluid used in treatment (bbl): 30 Max pressure during treatment (psi): 250

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: Number of staged intervals: 0

Total acid used in treatment (bbl): 12 Max frac gradient (psi/ft): 0.60

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 60

Fresh water used in treatment (bbl): 18 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 0 Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/10/2012 Hours: 24 Bbl oil: 30 Mcf Gas: 0 Bbl H2O: 85

Calculated 24 hour rate: Bbl oil: 30 Mcf Gas: 0 Bbl H2O: 86 GOR: 0

Test Method: Pump Casing PSI: 0 Tubing PSI: 20 Choke Size:

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 35

Tubing Size: 2 + 3/8 Tubing Setting Depth: Tbg setting date: 03/30/2012 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: Jake Flora

Title: Petroleum Engineer Date: \_\_\_\_\_ Email: jakeflora@kfrcorp.com  
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### **Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>

Total Attach: 0 Files

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

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