

FORM
5A

Rev
06/12

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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Document Number:

2288046

Date Received:

03/21/2012

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: 77330

4. Contact Name: DIANE MCCALLUM

2. Name of Operator: SG INTERESTS I LTD

Phone: (970) 252-0696

3. Address: 1485 FLORIDA RD #C202

Fax: (970) 252-0636

City: DURANGO State: CO Zip: 81301

5. API Number 05-051-06069-00

6. County: GUNNISON

7. Well Name: FEDERAL

Well Number: 11-90-24 #1A

8. Location: QtrQtr: SWNE Section: 24 Township: 11S Range: 90W Meridian: 6

9. Field Name: BULL MOUNTAIN Field Code: 7815

Completed Interval

FORMATION: COZZETTE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/07/2011 End Date: Date of First Production this formation: 12/17/2011

Perforations Top: 4447 Bottom: 4457 No. Holes: 40 Hole size: 36/100

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

1500 GAL 15% HCl + 111,484 GAL X-LINKED GEL + 214,000 #S 20/40 WHITE SAND.

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

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

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

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

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

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

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

Total proppant used (lbs): Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/16/2011 Hours: 52 Bbl oil: 0 Mcf Gas: 915 Bbl H2O: 208

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

Test Method: VENT Casing PSI: 1730 Tubing PSI: Choke Size: 12/64

Gas Disposition: VENTED Gas Type: WET Btu Gas: 1 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 4410 Tbg setting date: 12/17/2011 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: DIANE MCCALLUM

Title: REGULATORY

Date: 3/20/2011

Email: DMCCALLUM@SGINTERESTS.COM

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Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 2288046 | FORM 5A SUBMITTED |
| 2288047 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|---|----------------------------|
| Permit | Off hold--sundry to permit COZZ rec'd. | 7/3/2012 8:09:40 AM |
| Permit | on hold pending receipt of sundry to add Cozzette as permitted fm. (in federal unit). | 5/21/2012 8:16:27 AM |
| Data Entry | BTU GAS IS REQUIRED FIELD IF MCF GAS IS ENTERED. | 4/26/2012 2:30:46 PM |

Total: 3 comment(s)