

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400304330

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, reoperation 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: 10338
2. Name of Operator: CARRIZO OIL & GAS INC
3. Address: 500 DALLAS STREET #2300
City: HOUSTON State: TX Zip: 77002
4. Contact Name: Tina Taylor
Phone: (713) 328-1000
Fax: (713) 328-1060

5. API Number 05-123-33958-00
6. County: WELD
7. Well Name: Debrine
Well Number: 21-44-8-61
8. Location: QtrQtr: SESE Section: 21 Township: 8N Range: 61W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/23/2012 End Date: 04/25/2012 Date of First Production this formation: 05/05/2012

Perforations Top: 7193 Bottom: 10717 No. Holes: 14 Hole size: 4 + 1/2

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

Preformed 14 stage Frac with 2,443,271 20/40 sand, 142,913 20/40 RC sand and 42,278 bbls total fluid.

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

Total fluid used in treatment (bbl): 42278
Max pressure during treatment (psi): 7435
Total gas used in treatment (mcf):
Fluid density at initial fracture (lbs/gal): 8.40
Type of gas used in treatment:
Max frac gradient (psi/ft): 3584.00
Total acid used in treatment (bbl):
Number of staged intervals: 14
Recycled water used in treatment (bbl):
Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): 12045
Disposition method for flowback:
Total proppant used (lbs): 2586184
Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/05/2012 Hours: 24 Bbl oil: 504 Mcf Gas: 5 Bbl H2O: 664
Calculated 24 hour rate: Bbl oil: 504 Mcf Gas: 5 Bbl H2O: 664 GOR: 9
Test Method: Jet Pump Casing PSI: 269 Tubing PSI: 2000 Choke Size:
Gas Disposition: FLARED Gas Type: DRY Btu Gas: 1358 API Gravity Oil: 35
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6220 Tbg setting date: 05/15/2012 Packer Depth: 6213

Reason for Non-Production:

Date formation Abandoned: Squeeze: [ ] Yes [ ] No If yes, number of sacks cmt

\*\* Bridge Plug Depth: \*\* Sacks cement on top: \*\* Wireline and Cement Job Summary must be attached.

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Tina Taylor

Title: Regulatory Compliance Date: \_\_\_\_\_ Email: tina.taylor@crzo.net  
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### **Attachment Check List**

Att Doc Num	Name
400304332	OTHER
400304619	CEMENT JOB SUMMARY
400304622	CEMENT JOB SUMMARY

Total Attach: 3 Files

### **General Comments**

**User Group**      **Comment**      **Comment Date**

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

Total: 0 comment(s)