

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



Table with columns DE, ET, OE, ES

Document Number: 2288018

Date Received: 03/23/2012

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: 8960
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY
3. Address: 410 17TH STREET SUITE #1400
City: DENVER State: CO Zip: 80202
4. Contact Name: KERRY A. MCCOWEN
Phone: (720) 440-6100
Fax: (720) 279-2331

5. API Number 05-123-32889-00
6. County: WELD
7. Well Name: Antelope
Well Number: 43-31
8. Location: QtrQtr: NWSE Section: 31 Township: 5N Range: 62W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type:
Treatment Date: 08/28/2011 End Date: Date of First Production this formation: 09/16/2011
Perforations Top: 6294 Bottom: 6542 No. Holes: 84 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: [ ]

CODELL PUMPED 32,508 GAL PAD FLUID. PUMPED 103,446 GAL PHASERFRAC W/250,040 LBS 20/40 SAND. ISDP 3150 PSI, ATP 3737 PSI, ATR 25.7 BPM. NIOBRARA PUMPED 19,992 PAD FLUID. PUMPED 114,996 GAL PHASERFRAC W/265,300 LBS. 30/50 SAND. ISDP 3175 PSI, ATP 4223 PSI, ATR 56.3 BPM.

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

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

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/30/2011 Hours: 24 Bbl oil: 39 Mcf Gas: 16 Bbl H2O: 3
Calculated 24 hour rate: Bbl oil: 39 Mcf Gas: 16 Bbl H2O: 3 GOR: 410
Test Method: FLOWING Casing PSI: 543 Tubing PSI: Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1283 API Gravity Oil: 39
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: \*\* 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: KERRY A. MCCOWEN

Title: VP OPERATIONS Date: 11/11/2011 Email KAM@BONANZACRK.COM

**Attachment Check List**

Att Doc Num	Name
2288018	FORM 5A SUBMITTED
2288019	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

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

Total: 0 comment(s)