

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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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: 22400 2. Name of Operator: DJ PRODUCTION SERVICES INC 3. Address: 1273 FALCON COURT City: WINDSOR State: CO Zip: 80550 4. Contact Name: Jeff Reale Phone: (303) 947-1387 Fax: (970) 667-0046

5. API Number 05-123-34486-00 6. County: WELD 7. Well Name: Nelson 8. Location: QtrQtr: NWNW Section: 5 Township: 4N Range: 67W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: Treatment Date: 11/27/2011 End Date: Date of First Production this formation: 12/29/2011 Perforations Top: 7023 Bottom: 7046 No. Holes: 92 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole: [ ]

Frac Codell w/ 4119 bbls slickwater, 115,500# of 30/50 sand, spearhead 500 bbls 7% kcl ahead of frac

This formation is commingled with another formation: [ ] Yes [X] 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: Max frac gradient (psi/ft): Total acid used in treatment (bbl): Number of staged intervals: 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: 12/30/2011 Hours: 24 Bbl oil: 118 Mcf Gas: 102 Bbl H2O: 34 Calculated 24 hour rate: Bbl oil: 118 Mcf Gas: 102 Bbl H2O: 34 GOR: 864 Test Method: Flowing Casing PSI: 300 Tubing PSI: 1075 Choke Size: Gas Disposition: SOLD Gas Type: WET Btu Gas: 1327 API Gravity Oil: 49 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7013 Tbg setting date: 12/28/2011 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: \*\* Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: \_\_\_\_\_

Treatment Date: 03/17/2012 End Date: \_\_\_\_\_ Date of First Production this formation: \_\_\_\_\_

Perforations Top: 6732 Bottom: 7046 No. Holes: 300 Hole size: 0.38

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

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: \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

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: 03/19/2012 Hours: 24 Bbl oil: 35 Mcf Gas: 135 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 35 Mcf Gas: 135 Bbl H2O: 0 GOR: 3857

Test Method: Flowing Casing PSI: 1100 Tubing PSI: 1350 Choke Size: \_\_\_\_\_

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1342 API Gravity Oil: 46

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7013 Tbg setting date: 12/28/2011 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: \_\_\_\_\_ \*\* Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: \_\_\_\_\_

Treatment Date: 01/27/2012 End Date: \_\_\_\_\_ Date of First Production this formation: 01/28/2012

Perforations Top: 6732 Bottom: 6914 No. Holes: 208 Hole size: 0.38

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Frac Niobrara w/ 5985 bbls slickwater, 200,250# of 40/70 sand, spearhead 500bbls 7% kcl ahead of frac

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: \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

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: 01/28/2012 Hours: 24 Bbl oil: 64 Mcf Gas: 125 Bbl H2O: 38

Calculated 24 hour rate: Bbl oil: 64 Mcf Gas: 125 Bbl H2O: 38 GOR: 1953

Test Method: Flowing Casing PSI: 650 Tubing PSI: 700 Choke Size: \_\_\_\_\_

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1342 API Gravity Oil: 47

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7013 Tbg setting date: 12/28/2011 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: \_\_\_\_\_ \*\* 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: Jeff Reale

Title: Agent Date: 5/17/2012 Email lam53@msn.com

**Attachment Check List**

Att Doc Num	Name
400264205	FORM 5A SUBMITTED
400286042	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)