

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:

400338163

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: 96340  
2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC  
3. Address: 4600 S DOWNING ST  
City: ENGLEWOOD State: CO Zip: 80113  
4. Contact Name: Jack Fincham  
Phone: (303) 906-3335  
Fax: (303) 761-9067

5. API Number 05-073-06467-00  
6. County: LINCOLN  
7. Well Name: Napali Well Number: # 6  
8. Location: QtrQtr: NWSW Section: 17 Township: 10S Range: 55W Meridian: 6  
9. Field Name: GREAT PLAINS Field Code: 32756

Completed Interval

FORMATION: MORROW Status: DRY AND ABANDONED Treatment Type:  
Treatment Date: 07/26/2012 End Date: 07/27/2012 Date of First Production this formation:  
Perforations Top: 7742 Bottom: 7746 No. Holes: 16 Hole size: 1/4

Provide a brief summary of the formation treatment:

Open Hole: ☐

No Treatment Perf only

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:

Min 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: 07/26/2012 Hours: 8 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 8  
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 24 GOR:  
Test Method: SWAB Casing PSI: Tubing PSI: Choke Size:  
Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 7704 Tbg setting date: 07/26/2012 Packer Depth: 7704

Reason for Non-Production: None Commerical

Date formation Abandoned: 07/27/2012 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 7740 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

FORMATION: MORROW V-11 Status: PRODUCING Treatment Type: \_\_\_\_\_  
Treatment Date: 07/27/2012 End Date: 07/28/2012 Date of First Production this formation: 08/01/2012  
Perforations Top: 7732 Bottom: 7738 No. Holes: 24 Hole size: 1/4  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

No Treatment, Perf only

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: \_\_\_\_\_

Min 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: 07/27/2012 Hours: 8 Bbl oil: 35 Mcf Gas: 0 Bbl H2O: 20  
Calculated 24 hour rate: Bbl oil: 105 Mcf Gas: 0 Bbl H2O: 60 GOR: \_\_\_\_\_  
Test Method: SWAB Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ Btu Gas: 0 API Gravity Oil: 35  
Tubing Size: 2 + 7/8 Tubing Setting Depth: 7735 Tbg setting date: 07/27/2012 Packer Depth: 7735

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: Jack Fincham

Title: Agent Date: \_\_\_\_\_ Email fincham4@msn.com

**Attachment Check List**

Att Doc Num	Name
400338240	WIRELINE JOB SUMMARY
400338242	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)