

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: 400434949

Date Received: 06/20/2013

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: 10142
2. Name of Operator: MID-CON ENERGY OPERATING INC
3. Address: 2431 E 61ST ST STE 850
City: TULSA State: OK Zip: 74136
4. Contact Name: Lindsey Vedros
Phone: (918) 743-7575
Fax: (918) 949-6567

5. API Number 05-017-07709-00
6. County: CHEYENNE
7. Well Name: HRMU
Well Number: 9-12
8. Location: QtrQtr: Lot 14 Section: 12 Township: 13S Range: 43W Meridian: 6
9. Field Name: HARKER RANCH Field Code: 33557

Completed Interval

FORMATION: MORROW V-7 Status: PRODUCING Treatment Type: ACID JOB
Treatment Date: 08/01/2012 End Date: 08/01/2012 Date of First Production this formation: 12/15/2012
Perforations Top: 5281 Bottom: 5298 No. Holes: 72 Hole size:

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

Set pkr, pump 850 gal 7 1/2% NEFE. 1/2bpm @ 1,500 psi. Pressure decreased very gradually to 800psi. Flush w/32 bbl 4% KCL. ISIP @ 700 psi. 5 min @ 650psi. 10 min @ 600 psi. SWI SDFN.

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

Total fluid used in treatment (bbl): 74 Max pressure during treatment (psi): 1500
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): 42 Number of staged intervals: 1
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 245
Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL
Total proppant used (lbs): Rule 805 green completion techniques were utilized: []

Reason why green completion not utilized: PRESSURE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/17/2012 Hours: 24 Bbl oil: 125 Mcf Gas: 0 Bbl H2O: 806
Calculated 24 hour rate: Bbl oil: 125 Mcf Gas: 0 Bbl H2O: 806 GOR:
Test Method: actual Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 40
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:

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

Signed: _____ Print Name: Lindsey Vedros

Title: Production Tech Date: 6/20/2013 Email: lvedros@midcon-energy.com
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Attachment Check List

Att Doc Num	Name
400434949	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)