

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:

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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: 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: Olga Chikaloff
Phone: (720) 440-1600
Fax: (720) 279-2331

5. API Number 05-123-36470-00
6. County: WELD
7. Well Name: State Pronghorn
Well Number: 31-34-16HNB
8. Location: QtrQtr: NENE Section: 16 Township: 5N Range: 61W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/28/2013 End Date: 03/29/2013 Date of First Production this formation: 04/06/2013

Perforations Top: 6717 Bottom: 10744 No. Holes: 0 Hole size: 0

Provide a brief summary of the formation treatment: Open Hole: ☐

Niobrara pumped a total of 49420 bbls of fluid and 4176440# of sand, ATP 3489, ATR 50.5, Final ISDP 2943, completed with sliding sleeves and casing packers.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 49420 Max pressure during treatment (psi): 3560

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.93

Total acid used in treatment (bbl): 0 Number of staged intervals: 18

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 10245

Fresh water used in treatment (bbl): 49420 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 4176440 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/19/2013 Hours: 72 Bbl oil: 1644 Mcf Gas: 1524 Bbl H2O: 741

Calculated 24 hour rate: Bbl oil: 548 Mcf Gas: 508 Bbl H2O: 247 GOR: 927

Test Method: Flowing Casing PSI: _____ Tubing PSI: 334 Choke Size: _____

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1311 API Gravity Oil: 43

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6294 Tbg setting date: 04/02/2013 Packer Depth: 6293

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: Olga Chikaloff

Title: Engineering Technician Date: _____ Email ochikaloff@bonanzacrk.com
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Attachment Check List

Att Doc Num	Name
400462896	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)