

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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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 05-123-36465-00
6. County: WELD
7. Well Name: Pronghorn Well Number: T-P-3HNB
8. Location: QtrQtr: SESE Section: 3 Township: 5N Range: 61W Meridian: 6
9. Field Name: _____ Field Code: _____

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/18/2013 End Date: 08/21/2013 Date of First Production this formation: 05/16/2013

Perforations Top: 6611 Bottom: 10654 No. Holes: _____ Hole size: 0

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

Niobrara pumped a total of 48413 bbls of fluid and 3923700# of sand, ATP 3617 psi, ATR 47.00 bpm, Final ISDP 3089 psi, completed with sliding sleeves and casing packers.

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

Total fluid used in treatment (bbl): 48413

Max pressure during treatment (psi): 4260

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): 5969

Fresh water used in treatment (bbl): 48413

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 3923700

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/13/2013 Hours: 72 Bbl oil: 450 Mcf Gas: 357 Bbl H2O: 579

Calculated 24 hour rate: Bbl oil: 150 Mcf Gas: 119 Bbl H2O: 193 GOR: 793

Test Method: Flowing Casing PSI: 256 Tubing PSI: 272 Choke Size: _____

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

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5606 Tbg setting date: 05/13/2013 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: Olga Chikaloff _____

Title: Engineering Technical _____

Date: _____

Email ochikaloff@bonanzacrk.com
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Attachment Check List

Att Doc Num

Name

400464039

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)