

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: 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 05-073-06530-00 6. County: LINCOLN 7. Well Name: Ma-State Well Number: # 2 8. Location: QtrQtr: SWSW Section: 24 Township: 10S Range: 56W Meridian: 6 9. Field Name: GREAT PLAINS Field Code: 32756

Completed Interval

FORMATION: CHEROKEE Status: PRODUCING Treatment Type: ACID JOB Treatment Date: 06/12/2013 End Date: 06/13/2013 Date of First Production this formation: 06/15/2013 Perforations Top: 7224 Bottom: 7232 No. Holes: 23 Hole size: 1/4

Provide a brief summary of the formation treatment: Acid Job, 15% HCL 19 bbls, 2% KCL 43 bbls

This formation is commingled with another formation: [] Yes [X] No Total fluid used in treatment (bbl): 62 Max pressure during treatment (psi): 500 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): 19 Number of staged intervals: Recycled water used in treatment (bbl): Flowback volume recovered (bbl): Fresh water used in treatment (bbl): 43 Disposition method for flowback: DISPOSAL Total proppant used (lbs): Rule 805 green completion techniques were utilized: [] Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/13/2013 Hours: 8 Bbl oil: 24 Mcf Gas: 0 Bbl H2O: 7 Calculated 24 hour rate: Bbl oil: 72 Mcf Gas: 0 Bbl H2O: 21 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: 7292 Tbg setting date: 06/13/2013 Packer Depth: 7292

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: 8/19/2013 Email: fincham4@msn.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400469122	FORM 5A SUBMITTED
400469129	WIRELINE JOB SUMMARY
400469131	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)