

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: 400486270 Date Received: 09/26/2013

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: 10399 2. Name of Operator: NIGHTHAWK PRODUCTION LLC 3. Address: 1805 SHEA CENTER DR #290 City: HIGHLANDS State: CO Zip: 80129 4. Contact Name: Mindy Obando Phone: (303) 407-9605 Fax: (303) 407-8790

5. API Number 05-073-06478-00 6. County: LINCOLN 7. Well Name: Pikes Peak Williams Well Number: 4-30 8. Location: QtrQtr: NWNW Section: 30 Township: 13S Range: 55W Meridian: 6 9. Field Name: BOLERO Field Code: 7153

Completed Interval

FORMATION: MARMATON Status: SHUT IN Treatment Type: ACID JOB

Treatment Date: 09/06/2013 End Date: 09/06/2013 Date of First Production this formation:

Perforations Top: 6416 Bottom: 6536 No. Holes: 64 Hole size: 52/100

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

Acidize 1500 gals 15% HCL

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

Total fluid used in treatment (bbl): 86 Max pressure during treatment (psi): 1300

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): 36 Number of staged intervals:

Recycled water used in treatment (bbl): 50 Flowback volume recovered (bbl): 60

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

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: 09/05/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 60

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 60 GOR:

Test Method: Pumping 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: 6508 Tbg setting date: 09/05/2013 Packer Depth: 6509

Reason for Non-Production: All water, no oil.

Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt

** Bridge Plug Depth: 6500 ** 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: Mindy Obando
Title: Accounting Manager Date: 9/26/2013 Email: mindyjobando@nighthawkenegy.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400486270	FORM 5A SUBMITTED
400486337	WIRELINE JOB SUMMARY
400486338	WIRELINE JOB SUMMARY
400486353	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)