

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:

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 ☒ 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:

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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: Mindy Obando
Title: Accounting Manager Date: 9/26/2013 Email: mindyjoobando@nighthawkenenergy.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)