

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



DE	ET	OE	ES
----	----	----	----

Document Number:

2233398

Date Received:

08/24/2012

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: 200149	4. Contact Name: MADELEINE LARIVIERE
2. Name of Operator: ATLAS RESOURCES LLC DBA ATLAS ROCKIES	Phone: (303) 308-1330
3. Address: 3500 MASSILLON ROAD #100	Fax: (303) 308-1590
City: UNIONTOWN State: OH Zip: 44685	

5. API Number 05-095-06364-00	6. County: PHILLIPS
7. Well Name: Hubbard Federal	Well Number: 843-5-11-L4
8. Location: QtrQtr: Lot 4 Section: 5 Township: 8N Range: 43W Meridian: 6	
9. Field Name: AMHERST	Field Code: 2480

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: End Date: Date of First Production this formation:

Perforations Top: 2426 Bottom: 2452 No. Holes: 156 Hole size: 42/100

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

"SAFETY MEETING  
50,040# 16/30 DANIELS  
50,000# 12/20 TEXAS GOLD  
60.25 CO2  
BREAKDOWN = 974 PSI  
ISIP = 815 PSI / 5 MIN = 641 PSI  
10 MIN = 608 PSI / 15 MIN = 593 PSI 553 BBLs"

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

Total fluid used in treatment (bbl): 553 Max pressure during treatment (psi): 1082

Total gas used in treatment (mcf): 1035 Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment: CARBON DIOXIDE Min frac gradient (psi/ft):

Total acid used in treatment (bbl): Number of staged intervals: 1

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

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

Total proppant used (lbs): 100040 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: 05/22/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 51 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 51 Bbl H2O: 0 GOR:

Test Method: FLOW Casing PSI: 230 Tubing PSI: Choke Size:

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 966 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 2461 Tbg setting date: 07/11/2012 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:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: Print Name: WILLIAM F HAYWORTH  
Title: PRESIDENT Date: 7/19/2012 Email: BHAYWORTH@BLACKRAVENENERGY.COM

### Attachment Check List

Att Doc Num	Name
2233398	FORM 5A SUBMITTED
2233399	OTHER

Total Attach: 2 Files

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Must submit fracture treatment to Frac Focus within 60 days of treatment.	10/2/2013 6:28:24 AM

Total: 1 comment(s)