

FORM  
5ARev  
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:

400494445

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: 96340 4. Contact Name: Jack Fincham  
 2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC Phone: (303) 906-3335  
 3. Address: 4600 S DOWNING ST Fax: (303) 761-9067  
 City: ENGLEWOOD State: CO Zip: 80113

5. API Number 05-073-06543-00 6. County: LINCOLN  
 7. Well Name: Big Wampum Well Number: # 1  
 8. Location: QtrQtr: NESE Section: 23 Township: 10S Range: 56W Meridian: 6  
 9. Field Name: WILDCAT Field Code: 99999

## Completed Interval

FORMATION: CHEROKEE Status: PRODUCING Treatment Type: \_\_\_\_\_  
 Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: 08/27/2013  
 Perforations Top: 7226 Bottom: 7236 No. Holes: 40 Hole size: 1/4

Provide a brief summary of the formation treatment:

Open Hole: ☐

No Treatment, 8-20-2013 perf 7226' - 7236', SWAB recover 96 bbls oil in 24 hr period

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

Total fluid used in treatment (bbl): \_\_\_\_\_

Max pressure during treatment (psi): \_\_\_\_\_

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): \_\_\_\_\_

Number of staged intervals: \_\_\_\_\_

Recycled water used in treatment (bbl): \_\_\_\_\_

Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_

Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): \_\_\_\_\_

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: \_\_\_\_\_

Fracture stimulations must be reported on FracFocus.org

## Test Information:

Date: 08/20/2013 Hours: 8 Bbl oil: 32 Mcf Gas: 0 Bbl H2O: 0  
 Calculated 24 hour rate: Bbl oil: 96 Mcf Gas: 0 Bbl H2O: 0 GOR: \_\_\_\_\_  
 Test Method: SWAB Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_  
 Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ Btu Gas: 0 API Gravity Oil: 38  
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 7150 Tbg setting date: 08/20/2013 Packer Depth: 7150

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:

Big Wampum # 1 well is a producing oil well from the Cherokee A formation. Operator requesting all information shown on Form 5A be confidential.

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: \_\_\_\_\_ Email fincham4@msn.com  
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### **Attachment Check List**

**Att Doc Num**      **Name**

400494446	WELLBORE DIAGRAM
400494447	WIRELINE JOB SUMMARY

Total Attach: 2 Files

### **General Comments**

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)