

**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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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: <u>8960</u>	4. Contact Name: <u>Olga Chikaloff</u>
2. Name of Operator: <u>BONANZA CREEK ENERGY OPERATING COMPANY</u>	Phone: <u>(720) 440-1600</u>
3. Address: <u>410 17TH STREET SUITE #1400</u>	Fax: <u>(720) 279-2331</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-123-37406-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>State Antelope</u>	Well Number: <u>41-44-30HNB</u>
8. Location: QtrQtr: <u>NENE</u> Section: <u>30</u> Township: <u>5N</u> Range: <u>62W</u> Meridian: <u>6</u>	
9. Field Name: _____	Field Code: _____

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 07/19/2013 End Date: 07/21/2013 Date of First Production this formation: 08/02/2013
Perforations Top: 6977 Bottom: 10811 No. Holes: _____ Hole size: 0

Provide a brief summary of the formation treatment:

Open Hole:

Niobrara pumped a total of 55948 bbls of fluid and 4230220# of sand, ATP 4285 psi, ATR 50.5 bpm, Final ISDP 3388 psi, completed with sliding sleeves and casing packers.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 55948 Max pressure during treatment (psi): 5546

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.96

Total acid used in treatment (bbl): 0 Number of staged intervals: 18

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 25372

Fresh water used in treatment (bbl): 55948 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 4230220 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/23/2013 Hours: 72 Bbl oil: 1320 Mcf Gas: 675 Bbl H2O: 459

Calculated 24 hour rate: Bbl oil: 440 Mcf Gas: 225 Bbl H2O: 153 GOR: 511

Test Method: Flowing Casing PSI: 894 Tubing PSI: 442 Choke Size: _____

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1311 API Gravity Oil: 43

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6530 Tbg setting date: 07/24/2013 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: Olga Chikaloff

Title: Engineering Technician Date: _____ Email: ochikaloff@bonanzackr.com

Attachment Check List

Att Doc Num	Name
400488712	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)