

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: 10220 4. Contact Name: Stephen Nichols
 2. Name of Operator: RAMSEY PROPERTY MANAGEMENT LLC Phone: (405) 302-6200
 3. Address: 2932 NW 122ND STREET - SUITE #4 Fax: (405) 302-6240
 City: OKLAHOMA CITY State: OK Zip: 73120- Email: senichols@ramseyllc.com

5. API Number 05-009-06676-00 6. County: BACA
 7. Well Name: Holt Well Number: 1
 8. Location: QtrQtr: SWSW Section: 31 Township: 34S Range: 42W Meridian: 6
 9. Field Name: VERDE Field Code: 86000

Completed Interval

FORMATION: KEYES Status: PRODUCING Treatment Type: ACID JOB

Treatment Date: 10/04/2013 End Date: 10/11/2013 Date of First Production this formation: 10/31/2013

Perforations Top: 4623 Bottom: 4634 No. Holes: 44 Hole size: 3/4

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

Pumped 1250 gallons 7 1/2% NEFE Acid. Treated at 610 psi and at 1 BPM. ISIP 40 psi, 30 seconds - vacuum

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 58 Max pressure during treatment (psi): 610
 Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.90
 Type of gas used in treatment: ETHANE Min frac gradient (psi/ft): 0.70
 Total acid used in treatment (bbl): 31 Number of staged intervals: 1
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 88
 Fresh water used in treatment (bbl): 26 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 0 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: PRESSURE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/21/2013 Hours: 24 Bbl oil: 24 Mcf Gas: _____ Bbl H2O: 18
 Calculated 24 hour rate: Bbl oil: 24 Mcf Gas: _____ Bbl H2O: 18 GOR: 0
 Test Method: Pumping Casing PSI: 110 Tubing PSI: 0 Choke Size: 1
 Gas Disposition: VENTED Gas Type: WET Btu Gas: 1000 API Gravity Oil: 37
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 4647 Tbg setting date: 10/15/2013 Packer Depth: 0

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:

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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: Stephen Nichols
Title: Managing Partner Date: _____ Email: senichols@ramseyllc.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400531697	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)