

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:

400538131

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: 10261

2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION

3. Address: 730 17TH ST STE 610

City: DENVER State: CO Zip: 80202

4. Contact Name: JONATHAN RUNGE

Phone: (720) 420-5700

Fax: (720) 420-5800

Email: jrunge@iptengineers.com

5. API Number 05-123-34147-00

7. Well Name: Larson Farms

8. Location: QtrQtr: NESW Section: 24 Township: 6N Range: 64W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 3-24

Completed Interval

FORMATION: <u>CODELL</u>		Status: <u>COMMINGLED</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>11/04/2013</u>		End Date: <u>11/04/2013</u>		Date of First Production this formation: _____	
Perforations	Top: <u>6888</u>	Bottom: <u>6904</u>	No. Holes: <u>64</u>	Hole size: <u>042/100</u>	

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

Frac Codell w/ 2142 bbls Slickwater pad, 4389 bbls Crosslink slurry (prop concentration ranging from 0.5-1.5 ppg 30/50 White). Pump 23.8 bbls 15% HCl. Flush w/ 84 bbls

This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Total fluid used in treatment (bbl): <u>6639</u>	Max pressure during treatment (psi): <u>5546</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.34</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.89</u>
Total acid used in treatment (bbl): <u>23</u>	Number of staged intervals: <u>1</u>
Recycled water used in treatment (bbl): <u>0</u>	Flowback volume recovered (bbl): <u>1972</u>
Fresh water used in treatment (bbl): <u>6602</u>	Disposition method for flowback: <u>DISPOSAL</u>
Total proppant used (lbs): <u>180000</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____	Hours: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____
Calculated 24 hour rate: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	GOR: _____
Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____	
Gas Disposition: _____	Gas Type: _____	Btu Gas: _____	API Gravity Oil: _____	
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____	

Reason for Non-Production:

Date formation Abandoned: _____	Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____
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** Bridge Plug Depth: _____
 ** Sacks cement on top: _____
 ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 11/08/2013

Perforations Top: 6610 Bottom: 6904 No. Holes: 224 Hole size: 035/100

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

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: 11/09/2013 Hours: 14 Bbl oil: 149 Mcf Gas: 200 Bbl H2O: 171

Calculated 24 hour rate: Bbl oil: 247 Mcf Gas: 331 Bbl H2O: 283 GOR: 1342

Test Method: FLOWING Casing PSI: 900 Tubing PSI: _____ Choke Size: 014/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1300 API Gravity Oil: 47

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/04/2013 End Date: 11/05/2013 Date of First Production this formation: _____

Perforations Top: 6610 Bottom: 6736 No. Holes: 160 Hole size: 035/100

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

Frac Nio B / 2148 bbls Slickwater Pad, 4265.2 bbls Slickwater slurry (prop concentration ranging from 0.5-1.5 ppg 30/50 White). Pump 23.8 bbls 15% HCl. Flush w/ 85 bbls Slickwater
Frac Nio A / 2143 bbls Slickwater Pad, 656 bbls Slickwater slurry (prop concentration ranging from 0.5-1.15 ppg 30/50 White).

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

Total fluid used in treatment (bbl): 9321 Max pressure during treatment (psi): 5964
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.89
Total acid used in treatment (bbl): 23 Number of staged intervals: 2
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1958
Fresh water used in treatment (bbl): 9286 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 242300 Rule 805 green completion techniques were utilized: ☒
Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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: JONATHAN RUNGE
Title: CONSULTANT Date: _____ Email jrunge@iptengineers.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400538174	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)