

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>10399</u>	4. Contact Name: <u>Joyce Henkin</u>
2. Name of Operator: <u>NIGHTHAWK PRODUCTION LLC</u>	Phone: <u>(303) 407-9609</u>
3. Address: <u>1805 SHEA CENTER DR #290</u>	Fax: <u>(303) 407-8790</u>
City: <u>HIGHLANDS</u> State: <u>CO</u> Zip: <u>80129</u>	Email: <u>joycehenkin@nighthawkenergy.com</u>

5. API Number <u>05-073-06567-00</u>	6. County: <u>LINCOLN</u>
7. Well Name: <u>JOHN CRAIG</u>	Well Number: <u>10-10</u>
8. Location: QtrQtr: <u>NWSE</u> Section: <u>10</u> Township: <u>10S</u> Range: <u>56W</u> Meridian: <u>6</u>	
9. Field Name: <u>OLD HOMESTEAD</u> Field Code: <u>60634</u>	

Completed Interval

FORMATION: CHEROKEE Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 07/31/2014

Perforations Top: 7461 Bottom: 7465 No. Holes: 16 Hole size: 43/100

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

Previously reported the Cherokee as dry and abandoned. Pulled WRBP on 7/31/14. Now commingled with Marmaton.

No additional treatment has been done since the initial acidization on 6/10/14 - 6/16/2014

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: 07/31/2014 Hours: 4 Bbl oil: 2 Mcf Gas: 0 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 12 Mcf Gas: 0 Bbl H2O: 0 GOR: 0

Test Method: pumping Casing PSI: 45 Tubing PSI: 38 Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: 0 API Gravity Oil: 36

Tubing Size: 2 + 7/8 Tubing Setting Depth: 7507 Tbg setting date: 08/01/2014 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: 8060 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

Commingling Cherokee with Marmaton - CIBP set @ 8,060'

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

Signed: _____ Print Name: Joyce Henkin

Title: Production Tech Date: _____ Email: joycehenkin@nighthawkenergy.com

Attachment Check List

Att Doc Num	Name
400670900	WIRELINE JOB SUMMARY
400670901	OPERATIONS SUMMARY
400670908	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)