

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:

400670780

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: 10399

2. Name of Operator: NIGHTHAWK PRODUCTION LLC

3. Address: 1805 SHEA CENTER DR #290

City: HIGHLANDS State: CO Zip: 80129

4. Contact Name: Joyce Henkin

Phone: (303) 407-9609

Fax: (303) 407-8790

Email: joycehenkin@nighthawkenergy.com

5. API Number 05-073-06567-00

7. Well Name: JOHN CRAIG

8. Location: QtrQtr: NWSE Section: 10 Township: 10S Range: 56W Meridian: 6

9. Field Name: OLD HOMESTEAD Field Code: 60634

6. County: LINCOLN

Well Number: 10-10

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@nighthawkenenergy.com
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Attachment Check List

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

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)