

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



Table with columns DE, ET, OE, ES

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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: 10489
2. Name of Operator: AUGUSTUS ENERGY RESOURCES LLC
3. Address: 36695 HWY 385
City: WRAY State: CO Zip: 80758
4. Contact Name: Loni Davis
Phone: (970) 332-3585
Fax: (970) 332-3587
Email: ldavis@augustusenergy.com

5. API Number 05-125-12100-00
6. County: YUMA
7. Well Name: Dusty Farms
Well Number: 42-13 5N47W
8. Location: QtrQtr: SENE Section: 13 Township: 5N Range: 47W Meridian: 6
9. Field Name: ROCK CREEK Field Code: 74006

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/18/2014 End Date: 09/18/2014 Date of First Production this formation: 09/18/2014
Perforations Top: 2726 Bottom: 2746 No. Holes: 40 Hole size: 47/100

Provide a brief summary of the formation treatment: Open Hole: [ ]
Total usage of 50,100 16/30 Texas Gold sand 49,860# 12/20 Texas Gold sand, & 480,000 scf N2 w/ 3 cooldowns.

This formation is commingled with another formation: [ ] Yes [X] No
Total fluid used in treatment (bbl): 353 Max pressure during treatment (psi): 1595
Total gas used in treatment (mcf): 480 Fluid density at initial fracture (lbs/gal): 8.33
Type of gas used in treatment: NITROGEN Min frac gradient (psi/ft): 0.50
Total acid used in treatment (bbl): 12 Number of staged intervals: 6
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 341 Disposition method for flowback:
Total proppant used (lbs): 99960 Rule 805 green completion techniques were utilized: [X]
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/17/2014 Hours: 3 Bbl oil: 0 Mcf Gas: 104 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 652 Tubing PSI: Choke Size: 6/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 996 API Gravity Oil: 0
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:

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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: Loni J. Davis

Title: Oper Acctg & Reg Spec Date: 9/19/2014 Email ldavis@augustusenergy.com  
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### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400675582	FORM 5A SUBMITTED
400691894	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

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

Total: 0 comment(s)