

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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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, reoperation 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: 10338
2. Name of Operator: CARRIZO OIL & GAS INC
3. Address: 500 DALLAS STREET #2300
City: HOUSTON State: TX Zip: 77002
4. Contact Name: Tina Taylor
Phone: (713) 328-1000
Fax: (713) 325-1060
Email: tina.taylor@crzo.net

5. API Number 05-123-34100-01
6. County: WELD
7. Well Name: Slick Rock
Well Number: 19-14-7-60
8. Location: QtrQtr: Lot 4 Section: 19 Township: 7N Range: 60W Meridian: 6
9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 03/24/2012 End Date: 03/25/2012 Date of First Production this formation: 04/06/2012
Perforations Top: 6976 Bottom: 10845 No. Holes: 16 Hole size: 2 + 3/4

Provide a brief summary of the formation treatment:

Open Hole: [X]

16 stages: Fracture stimulated through a port and packer system with 2,816,586 lbs Ottawa 20/40 sand and 240,080 lbs 40/70 Ottawa sand 19,238 CRC 20/40 sand with 3,249,040 Total Proppant pumped.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 50973 Max pressure during treatment (psi): 6525
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.90
Type of gas used in treatment: Min frac gradient (psi/ft): 0.80
Total acid used in treatment (bbl): Number of staged intervals: 16
Recycled water used in treatment (bbl): 44586 Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): 6387 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 3249040 Rule 805 green completion techniques were utilized: []

Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/08/2012 Hours: 24 Bbl oil: 411 Mcf Gas: 346 Bbl H2O: 698
Calculated 24 hour rate: Bbl oil: 411 Mcf Gas: 346 Bbl H2O: 698 GOR: 841
Test Method: Jet Pump Casing PSI: 195 Tubing PSI: 3150 Choke Size: 32/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1488 API Gravity Oil: 38
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6102 Tbg setting date: 08/22/2012 Packer Depth: 6012

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:

Swell Packer was set across 600' from section line to keep wellbore from 7" casing shoe to Swell Packer unproduced.

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

Signed: _____ Print Name: Tina Taylor

Title: Regulatory Compliance Date: 4/23/2013 Email: tina.taylor@crzo.net
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
2233994	WELLBORE DIAGRAM
400407865	COMPLETED INTERVAL REPORT
400428785	FORM 5A SUBMITTED

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Oper. corrected total fluid to 50973 BBL: 6387 BBL fresh water, 266623 BBL phaser frac, 17963 linear gel. Oper. corrected fluid density, provided flowback disposition and reason why not a green completion.	7/11/2014 7:53:40 PM
Permit	Had this form "unapproved" to correct several errors. Req'd missing or inaccurate info. Added comment about swell packer from form 5 submitted.	5/5/2014 6:50:35 AM

Total: 2 comment(s)