

FORM
5ARev
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:

400754576

Date Received:

01/19/2015

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: 66190 4. Contact Name: Joe Glassey
 2. Name of Operator: OMIMEX PETROLEUM INC Phone: (817) 460-7777
 3. Address: 7950 JOHN T WHITE ROAD Fax: (817) 460-1381
 City: FORT WORTH State: TX Zip: 76120 Email: joe_glassey@omimexgroup.com

5. API Number 05-095-06464-00 6. County: PHILLIPS
 7. Well Name: Moss Well Number: 7-19-7-44
 8. Location: QtrQtr: SWNE Section: 19 Township: 7N Range: 44W Meridian: 6
 9. Field Name: HOLYOKE SOUTH Field Code: 36650

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATIONTreatment Date: 12/16/2014 End Date: 12/16/2014 Date of First Production this formation: 12/23/2014Perforations Top: 2467 Bottom: 2508 No. Holes: 82 Hole size: 0.41

Provide a brief summary of the formation treatment:

Open Hole: ☐

pumped 500 gals of 7.5% HCL, 55 gals of Scale Inhibitor, 90,400 lbs of 16/30 BROWN, 5,060 lbs of 16/30 CRC, and 55 TONS OF CO₂.
 BREAKDOWN @ 1030PSI. ISIP @ 700PSI. 5MIN @ 520PSI, 10MIN @ 500PSI, 15 MIN @ 490PSI.

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 835Max pressure during treatment (psi): 1067Total gas used in treatment (mcf): 1058Fluid density at initial fracture (lbs/gal): 8.33Type of gas used in treatment: CARBON DIOXIDEMin frac gradient (psi/ft): 0.71Total acid used in treatment (bbl): 12Number of staged intervals: 1Recycled water used in treatment (bbl): 0Flowback volume recovered (bbl): 20Fresh water used in treatment (bbl): 527Disposition method for flowback: DISPOSALTotal proppant used (lbs): 95460Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/23/2014 Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H₂O: _____Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 118 Bbl H₂O: 0 GOR: 0Test Method: Barton Chart Casing PSI: 538 Tubing PSI: 0 Choke Size: 0.5Gas Disposition: SOLD Gas Type: WET Btu Gas: 1989 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:

Converted tons of co2 to scf by using 19.25 scf as a universal number in the Total gas used (mcf) box under the formation section. 21 day Production Test. No tubing in well, there is no tubing pressures available.

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

Signed: _____ Print Name: Joe Glassey

Title: Petroleum Eng. Tech Date: 1/19/2015 Email joe_glassey@omimexgroup.com

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Attachment Check List

Att Doc Num **Name**

400754576	FORM 5A SUBMITTED
400774178	NET PRESSURE CHART
400774180	OPERATIONS SUMMARY

Total Attach: 3 Files

General Comments

User Group **Comment** **Comment Date**

#Error		
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Total: 0 comment(s)