

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:

01/23/2015

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

5. API Number 05-095-06465-00
6. County: PHILLIPS
7. Well Name: Mailander
Well Number: 4-34-6-45
8. Location: QtrQtr: NWNW Section: 34 Township: 6N Range: 45W Meridian: 6
9. Field Name: BALLYNEAL Field Code: 1970

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 12/18/2014 End Date: 12/18/2014 Date of First Production this formation: 12/22/2014
Perforations Top: 2472 Bottom: 2510 No. Holes: 76 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, 90,220lbs 16/30 BROWN, 5,100lbs 16/30 CRC, and 56 TONS OF CO2. BREAKDOWN @ 1040PSI. ISIP @ 780PSI. 5MIN @ 650PSI, 10MIN @ 550PSI, 15 MIN @ 510PSI.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 835

Max pressure during treatment (psi): 1047

Total gas used in treatment (mcf): 1078

Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: CARBON DIOXIDE

Min frac gradient (psi/ft): 0.75

Total acid used in treatment (bbl): 12

Number of staged intervals: 1

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 20

Fresh water used in treatment (bbl): 527

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 95320

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/22/2014 Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 173 Bbl H2O: 0 GOR: 0
Test Method: Barton Chart Casing PSI: 510 Tubing PSI: _____ Choke Size: 0.5
Gas Disposition: SOLD Gas Type: WET Btu Gas: 906 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. 23 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: 1/23/2015

Email joe_glassey@omimexgroup.com

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Attachment Check List

Att Doc Num

Name

400765200	FORM 5A SUBMITTED
400775406	OPERATIONS SUMMARY
400775410	NET PRESSURE CHART

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)