

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:

400219972

Date Received:

11/21/2011

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: 10332  
2. Name of Operator: PATARA OIL & GAS LLC  
3. Address: 333 CLAY STREET #3960  
City: HOUSTON State: TX Zip: 77002  
4. Contact Name: Christopher Noonan  
Phone: (303) 563-5377  
Fax: (720) 235-4560  
Email: bnoonan@pataraog.com

5. API Number 05-113-06243-00  
6. County: SAN MIGUEL  
7. Well Name: HC Fed  
Well Number: 31-31B-45-14  
8. Location: QtrQtr: Lot 3 Section: 31 Township: 45N Range: 14W Meridian: N  
9. Field Name: HAMILTON CREEK Field Code: 33540

Completed Interval

FORMATION: AKAH SALT Status: PRODUCING Treatment Type:  
Treatment Date: 10/02/2011 End Date: Date of First Production this formation: 10/25/2011  
Perforations Top: 8690 Bottom: 9074 No. Holes: 272 Hole size: 34/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac Treated 10/3/2011 w/87,868# sand and Co2 foam

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: Hours: Bbl oil: Mcf Gas: Bbl H2O:  
Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:  
Test Method: Casing PSI: Tubing PSI: Choke Size:  
Gas Disposition: Gas Type: Btu Gas: API Gravity Oil:  
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.

FORMATION: <u>DESERT CREEK</u>		Status: <u>PRODUCING</u>		Treatment Type: _____	
Treatment Date: <u>10/20/2011</u>		End Date: _____		Date of First Production this formation: <u>11/25/2011</u>	
Perforations	Top: <u>8372</u>	Bottom: <u>8410</u>	No. Holes: <u>152</u>	Hole size: <u>34/100</u>	

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

Frac Treated 10/21/2011 w/96,212# sand and Co2 foam

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: <input type="checkbox"/>

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: _____	Hours: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____
Calculated 24 hour rate: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	GOR: _____
Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____	
Gas Disposition: _____	Gas Type: _____	Btu Gas: _____	API Gravity Oil: _____	
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.

FORMATION: HONAKER TRAIL		Status: PRODUCING		Treatment Type: _____	
Treatment Date: 10/22/2011		End Date: _____		Date of First Production this formation: 11/25/2011	
Perforations	Top: 7393	Bottom: 7591	No. Holes: 150	Hole size: 34/100	

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

Frac Treated 10/22/2011 w/129,689# sand and Co2 foam

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: <input type="checkbox"/>

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: _____	Hours: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____
Calculated 24 hour rate: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	GOR: _____
Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____	
Gas Disposition: _____	Gas Type: _____	Btu Gas: _____	API Gravity Oil: _____	
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.

FORMATION: HOVENWEEP SHALE		Status: PRODUCING		Treatment Type: _____	
Treatment Date: 10/21/2011		End Date: _____		Date of First Production this formation: 10/25/2011	
Perforations	Top: 7970	Bottom: 8018	No. Holes: 129	Hole size: 34/100	

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

Frac Treated 10/21/2011 w/81,363# sand and Co2 foam

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: <input type="checkbox"/>

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: _____	Hours: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____
Calculated 24 hour rate: _____	Bbl oil: _____	Mcf Gas: _____	Bbl H2O: _____	GOR: _____
Test Method: _____	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____	
Gas Disposition: _____	Gas Type: _____	Btu Gas: _____	API Gravity Oil: _____	
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.

FORMATION: HERMOSA Status: COMMINGLED Treatment Type: \_\_\_\_\_  
Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: \_\_\_\_\_  
Perforations Top: 7393 Bottom: 9074 No. Holes: 703 Hole size: 34/100  
Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

All productive formations are part of the Hermosa Group.

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: 11/24/2011 Hours: 24 Bbl oil: 0 Mcf Gas: 3000 Bbl H2O: 0  
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 3000 Bbl H2O: 0 GOR: \_\_\_\_\_  
Test Method: measured Casing PSI: 320 Tubing PSI: \_\_\_\_\_ Choke Size: 32/64  
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 981 API Gravity Oil: 0  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7293 Tbg setting date: 11/01/2011 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:

Test data representative of all productive, commingled zones.

Please contact Christopher Noonan with Patara with any questions or concerns. Thank you.

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

Signed: \_\_\_\_\_ Print Name: Christopher A. Noonan  
Title: Production Technician Date: 11/21/2011 Email: bnoonan@pataraog.com

**Attachment Check List**

Att Doc Num	Name
2519752	OPERATIONS SUMMARY
400219972	FORM 5A SUBMITTED

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	The Hermosa panel (commingled production test) in this form 5A represents the Honaker Trail, Hovenweep, Desert Creek, and the Akah Salt. These four formations make up a large part of the Hermosa Grp. However the form 7 reporting must be allocated numbers for all four formations and not reported as Hermosa.	4/3/2015 5:51:19 AM
Permit	Form 5A done incorrectly. Formations not common source and must be allocated with four individual form 7's.	3/17/2015 10:44:50 AM
Permit	Never received wellbore diagram. Top of production zone is on a state lease.	10/24/2012 2:55:50 PM
Permit	Request a wellbore diagram.	10/24/2012 2:23:40 PM
Permit	There appears to be problems with this productive interval.	10/12/2012 3:14:09 PM

Total: 5 comment(s)