

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:

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Date Received:

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: 27742 4. Contact Name: Michelle Robles
2. Name of Operator: EOG RESOURCES INC Phone: (303) 262-9928
3. Address: 600 17TH ST STE 1100N Fax: (303) 824-5400
City: DENVER State: CO Zip: 80202 Email: Michelle_Robles@eogresources.com

5. API Number 05-123-31573-00 6. County: WELD
7. Well Name: Longhorn G Well Number: 4-36H
8. Location: QtrQtr: SESW Section: 36 Township: 12N Range: 63W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: GREENHORN Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/07/2014 End Date: 04/13/2014 Date of First Production this formation: 05/01/2014

Perforations Top: 8183 Bottom: 11737 No. Holes: 519 Hole size: 0.4

Provide a brief summary of the formation treatment:

Open Hole: ☐

4,870,040# 100 Mesh Sand, 542,030# 40/70 Sand

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

Total fluid used in treatment (bbl): 94962

Max pressure during treatment (psi): 8172

Total gas used in treatment (mcf): 0

Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.86

Total acid used in treatment (bbl): 516

Number of staged intervals: 20

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 3962

Fresh water used in treatment (bbl): 94962

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 8412070

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/04/2014 Hours: 24 Bbl oil: 241 Mcf Gas: 208 Bbl H2O: 325

Calculated 24 hour rate: Bbl oil: 241 Mcf Gas: 208 Bbl H2O: 325 GOR: 800

Test Method: Pumping Casing PSI: 115 Tubing PSI: 100 Choke Size: 32

Gas Disposition: FLARED Gas Type: DRY Btu Gas: 1702 API Gravity Oil: 40

Tubing Size: 2 + 7/8 Tubing Setting Depth: 7219 Tbg setting date: 04/26/2014 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:

Choke Size: 32/64

*****CONFIDENTIAL*****

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

Signed: _____

Print Name: Michelle Robles

Title: Regulatory Administrator

Date: _____

Email: Michelle_Robles@EOGResources.com

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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Total Attach: 0 Files

General Comments

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

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Total: 0 comment(s)