

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: 5
2. Name of Operator: COLORADO OIL & GAS CONSERVATION
3. Address: 1120 LINCOLN ST SUITE 801
City: DENVER State: CO Zip: 80203
4. Contact Name: collin androus
Phone: (303) 894-2100
Fax:
Email: collin.androus@state.co.us

5. API Number 05-007-06271-00
6. County: ARCHULETA
7. Well Name: HWY 151 34-4-30 MW
Well Number: 1
8. Location: QtrQtr: SWNW Section: 30 Township: 34N Range: 4W Meridian: M
9. Field Name: UNKNOWN Field Code: 85250

Completed Interval

FORMATION: FRUITLAND COAL Status: SHUT IN Treatment Type:

Treatment Date: End Date: Date of First Production this formation:

Perforations Top: 218 Bottom: 241 No. Holes: 56 Hole size: 0.34

Provide a brief summary of the formation treatment: Open Hole: [ ]

Upper transducer set at 2.3 feet below ground surface. Type and Rating is the LT 500 - 30 psia.
Lower transducer set at 250 feet below ground surface. Type and Rating is the LT 700 - 1000 psia
4 holes per foot, no info on size.

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

Total fluid used in treatment (bbl):
Total gas used in treatment (mcf):
Type of gas used in treatment:
Total acid used in treatment (bbl):
Recycled water used in treatment (bbl):
Fresh water used in treatment (bbl):
Total proppant used (lbs):
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal):
Min frac gradient (psi/ft):
Number of staged intervals:
Flowback volume recovered (bbl):
Disposition method for flowback:
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: Monitoring Well

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:

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

Signed: \_\_\_\_\_ Print Name: collin androus

Title: \_\_\_\_\_ Date: 6/15/2015 Email collin.androus@state.co.us

### Attachment Check List

**Att Doc Num**      **Name**

400849997	FORM 5A SUBMITTED
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Total Attach: 1 Files

### General Comments

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

Environmental	This is an observation well. Upper transducer set at 2.3 feet below ground surface. Type and Rating is the LT 500 - 30 psia. Lower transducer set at 250 feet below ground surface. Type and Rating is the LT 700 - 1000 psia Peforation hole size was taken from completion records of other program wells.	6/11/2015 4:20:59 PM
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Total: 1 comment(s)