

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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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: 10433
2. Name of Operator: PICEANCE ENERGY LLC
3. Address: 1512 LARIMER STREET #1000
City: DENVER State: CO Zip: 80202
4. Contact Name: MEL LACKIE
Phone: (303) 339-4400
Fax: (303) 339-4399
Email: mlackie@laramie-energy.com

5. API Number 05-077-09692-00
6. County: MESA
7. Well Name: Sup & Shep Federal
Well Number: 25-12M
8. Location: QtrQtr: NESW Section: 25 Township: 9S Range: 93W Meridian: 6
9. Field Name: BUZZARD CREEK Field Code: 9500

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/10/2015 End Date: 04/22/2015 Date of First Production this formation: 04/11/2015
Perforations Top: 6908 Bottom: 8364 No. Holes: 202 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole: []
48 bbls 15% HCL; 71,356 bbls slickwater with adds. and FR-76; no proppant

This formation is commingled with another formation: [] Yes [X] No
Total fluid used in treatment (bbl): 71404 Max pressure during treatment (psi): 6220
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.40
Type of gas used in treatment: Min frac gradient (psi/ft): 0.67
Total acid used in treatment (bbl): 48 Number of staged intervals: 7
Recycled water used in treatment (bbl): 41386 Flowback volume recovered (bbl): 38563
Fresh water used in treatment (bbl): 29970 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 0 Rule 805 green completion techniques were utilized: [X]
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/06/2015 Hours: 1 Bbl oil: 0 Mcf Gas: 47 Bbl H2O: 6
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1124 Bbl H2O: 133 GOR: 0
Test Method: flowing Casing PSI: 1312 Tubing PSI: 1230 Choke Size: 22
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1125 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8004 Tbg setting date: 06/05/2015 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:

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

Signed: _____ Print Name: MEL LACKIE
Title: ENGINEERING TECHNICIAN Date: _____ Email: mlackie@laramie-energy.com
:

Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

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

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Total: 0 comment(s)