

FORM
5ARev
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: 46290 4. Contact Name: Carelia Rojas
 2. Name of Operator: K P KAUFFMAN COMPANY INC Phone: (303) 8254822
 3. Address: 1675 BROADWAY, STE 2800 Fax: (303) 8254825
 City: DENVER State: CO Zip: 80202 Email: crojas@kpk.com

5. API Number 05-039-06459-00 6. County: ELBERT
 7. Well Name: DUFFY Well Number: 10-3
 8. Location: QtrQtr: NENW Section: 10 Township: 7S Range: 63W Meridian: 6
 9. Field Name: IRONHORSE Field Code: 39400

Completed Interval

FORMATION: D SAND Status: TEMPORARILY ABANDONED Treatment Type: _____

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

Perforations Top: 8008 Bottom: 8014 No. Holes: 12 Hole size: 0.38Provide a brief summary of the formation treatment: _____ Open Hole: ☐

A CIBP was set at 7923ft which was found leaking on 05/05/2010
 A second CIBP has been set at 7880ft with 2 sacks of cement at the top on 06/23/2010

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: 08/08/1983 Hours: 24 Bbl oil: 25 Mcf Gas: 0 Bbl H2O: 0Calculated 24 hour rate: Bbl oil: 25 Mcf Gas: 0 Bbl H2O: 0 GOR: 0Test Method: rod pump Casing PSI: 460 Tubing PSI: 14 Choke Size: 2Gas Disposition: VENTED Gas Type: DRY Btu Gas: 0 API Gravity Oil: 37Tubing Size: 2 + 3/8 Tubing Setting Depth: 7800 Tbg setting date: 08/30/1983 Packer Depth: _____Reason for Non-Production: KPK will recompleate this well once the economic market is more favorableDate formation Abandoned: 04/20/2005 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____** Bridge Plug Depth: 7880 ** Sacks cement on top: 2 ** 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: Susana Lara-Mesa

Title: VP of Engineering Date: _____ Email: slaramesa@kpk.com
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Attachment Check List

Att Doc Num **Name**

400891660	WIRELINE JOB SUMMARY
400891662	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

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Total: 0 comment(s)