

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:

400930857

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: 10439

2. Name of Operator: CARRIZO NIOBRARA LLC

3. Address: 500 DALLAS STREET #2300

City: HOUSTON State: TX Zip: 77002

4. Contact Name: CAROL PRUITT

Phone: (713) 328-1000

Fax: (713) 328-1060

Email: CAROL.PRUITT@CRZO.NET

5. API Number 05-123-36557-00

7. Well Name: Sievers

6. County: WELD

Well Number: 1-3-7-62

8. Location: QtrQtr: SESE Section: 3 Township: 7N Range: 62W Meridian: 6

9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA

Status: PRODUCING

Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/29/2013 End Date: 05/31/2013 Date of First Production this formation: 06/15/2013

Perforations Top: 6860 Bottom: 10920 No. Holes: Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☒

FRACTURE STIMULATED THROUGH A PORT AND PACKER SYSTEM WITH 2,749,222 LBS 20/40 SAND AND 51,172 BBLS FRESH WATER. NO ACID OR GAS USED IN THIS TREATMENT.

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

Total fluid used in treatment (bbl): 51172

Max pressure during treatment (psi): 6974

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal): 8.90

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.84

Total acid used in treatment (bbl):

Number of staged intervals: 14

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl): 19445

Fresh water used in treatment (bbl): 51172

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 2749222

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 06/18/2013 Hours: 24 Bbl oil: 239 Mcf Gas: 115 Bbl H2O: 643

Calculated 24 hour rate: Bbl oil: 239 Mcf Gas: 115 Bbl H2O: 643 GOR: 481

Test Method: 24 HR FLOWBACK Casing PSI: 180 Tubing PSI: 2000 Choke Size: 48/64

Gas Disposition: FLARED Gas Type: WET Btu Gas: 1322 API Gravity Oil: 36

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6140 Tbg setting date: 06/12/2013 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:

GAS ANALYSIS ATTACHED AS "OTHER" FORM 10 SUBMITTED, DOC. NO. 400930899

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

Signed: _____

Print Name: CAROL PRUITT

Title: REGULATORY COMPLIANCE

Date: _____

Email CAROL.PRUITT@CRZO.NET

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Attachment Check List

Att Doc Num

Name

400931164

OTHER

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)