

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:
400885939

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: <u>96155</u>	4. Contact Name: <u>Elvera Berryman</u>
2. Name of Operator: <u>WHITING OIL & GAS CORPORATION</u>	Phone: <u>(303) 390-4221</u>
3. Address: <u>1700 BROADWAY STE 2300</u>	Fax: <u>(303) 390-1598</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>	Email: <u>elvera.berryman@whiting.com</u>

5. API Number <u>05-123-40411-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Razor</u>	Well Number: <u>29F-2007</u>
8. Location: QtrQtr: <u>SENW</u> Section: <u>29</u> Township: <u>10N</u> Range: <u>58W</u> Meridian: <u>6</u>	
9. Field Name: <u>DJ HORIZONTAL NIOBRARA</u> Field Code: <u>16950</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/28/2015 End Date: 10/02/2015 Date of First Production this formation: 10/20/2015
Perforations Top: 6266 Bottom: 13531 No. Holes: 1068 Hole size: 3/8

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

Cemented Liner 30 staged intervals. Fluid Type: Slickwater.
Total Clean Volume: 188026 bbl Slick Water; 657 bbl 15%HCL Acid.
Total Proppant Used: 4851071# 30/50 Premium White; 106807# 40/70 Premium White.
See attached wellbore diagram for details.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 188683 Max pressure during treatment (psi): 8167
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33
Type of gas used in treatment: Min frac gradient (psi/ft): 0.78
Total acid used in treatment (bbl): 657 Number of staged intervals: 30
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 16439
Fresh water used in treatment (bbl): 188026 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 4957878 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/06/2015 Hours: 24 Bbl oil: 406 Mcf Gas: 123 Bbl H2O: 895
Calculated 24 hour rate: Bbl oil: 406 Mcf Gas: 123 Bbl H2O: 895 GOR: 303
Test Method: Separator Casing PSI: 60 Tubing PSI: 215 Choke Size: 30/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1553 API Gravity Oil: 56
Tubing Size: 2 + 7/8 Tubing Setting Depth: 5221 Tbg setting date: 10/18/2015 Packer Depth: 5211

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:

Landing Collar is a 13779'. Cement fills the hole from 13779' to TD.

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

Signed: _____ Print Name: Elvera Berryman
Title: Engineering Technician Date: _____ Email: elvera.berryman@whiting.com

Attachment Check List

Att Doc Num	Name
400958823	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)