

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:

401137839

Date Received:

11/03/2016

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: 10447
2. Name of Operator: URSA OPERATING COMPANY LLC
3. Address: 1050 17TH STREET #1700
City: DENVER State: CO Zip: 80265
4. Contact Name: JENNIFER LIND
Phone: (720) 508-8362
Fax:
Email: JLIND@URSARESOURCE.COM

5. API Number 05-045-22472-00
6. County: GARFIELD
7. Well Name: TOMPKINS
Well Number: 32C-08-07-95
8. Location: QtrQtr: SESE Section: 5 Township: 7S Range: 95W Meridian: 6
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

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

Treatment Date: 09/15/2016 End Date: 09/23/2016 Date of First Production this formation: 09/30/2016

Perforations Top: 5225 Bottom: 7456 No. Holes: 432 Hole size: 0.37

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

Frac'd 144,916 bbls of 2% KCL slickwater and no proppant. Frac pair with Tompkins 42C-08-07-95 (API 05045-22474).

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

Total fluid used in treatment (bbl): 144916 Max pressure during treatment (psi): 7831

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.40

Type of gas used in treatment: Min frac gradient (psi/ft): 0.69

Total acid used in treatment (bbl): Number of staged intervals: 8

Recycled water used in treatment (bbl): 144916 Flowback volume recovered (bbl): 108496

Fresh water used in treatment (bbl): Disposition method for flowback: RECYCLE

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: 10/18/2016 Hours: 24 Bbl oil: 0 Mcf Gas: 3295 Bbl H2O: 901

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 3295 Bbl H2O: 901 GOR: 0

Test Method: Flowing Casing PSI: 550 Tubing PSI: 1250 Choke Size: 64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1008 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6354 Tbg setting date: 09/30/2016 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:

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

Signed: _____

Print Name: JENNIFER LIND

Title: REGULATORY ANALYST

Date: 11/3/2016

Email: JLIND@URSARESOURCES.COM

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Attachment Check List

Att Doc Num

Name

401137839 FORM 5A SUBMITTED

401142483 WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

Permit	Passes permitting.	03/08/2017
Permit	Missing Form 10. Required prior to approval. Submitted by the Operator document#401224648 Ready to pass.	03/02/2017
Permit	Treatment date should match the submitted FracFocus report.	02/28/2017

Total: 3 comment(s)