

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: 401494135

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: 10459 4. Contact Name: Troy Owens  
 2. Name of Operator: EXTRACTION OIL & GAS INC Phone: (720) 557-8303  
 3. Address: 370 17TH STREET SUITE 5300 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202 Email: towens@extractionog.com

5. API Number 05-123-43748-00 6. County: WELD  
 7. Well Name: TC MOISER HILL Well Number: 2-9-11  
 8. Location: QtrQtr: SENE Section: 8 Township: 5N Range: 66W Meridian: 6  
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/04/2017 End Date: 07/29/2017 Date of First Production this formation: 12/05/2017

Perforations Top: 8025 Bottom: 20465 No. Holes: 2105 Hole size: 11/25

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

63 stage plug and perf;  
382429 total bbls of fresh water and 7.5% HCl acid pumped  
33580310 total lbs of 40/70 proppant pumped

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 382429 Max pressure during treatment (psi): 8944

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 0.93

Total acid used in treatment (bbl): 504 Number of staged intervals: 63

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): 1536

Fresh water used in treatment (bbl): 381925 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 33580310 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/03/2017 Hours: 24 Bbl oil: 616 Mcf Gas: 1939 Bbl H2O: 511

Calculated 24 hour rate: Bbl oil: 616 Mcf Gas: 1939 Bbl H2O: 511 GOR: 3148

Test Method: Measured Casing PSI: 3141 Tubing PSI: 2614 Choke Size: 18/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1292 API Gravity Oil: 51

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7941 Tbg setting date: 11/12/2017 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:

Actual TPZ: 6 FSL; 518 FWL

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

Signed: \_\_\_\_\_ Print Name: Troy Owens

Title: Completions Engineer Date: \_\_\_\_\_ Email towens@extractionog.com

### Attachment Check List

**Att Doc Num**      **Name**

401494161	WELLBORE DIAGRAM
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Total Attach: 1 Files

### General Comments

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

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)