

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



Table with columns DE, ET, OE, ES

Document Number: 400968383

Date Received: 01/11/2016

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, reoperation 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: 96155
2. Name of Operator: WHITING OIL & GAS CORPORATION
3. Address: 1700 BROADWAY STE 2300
City: DENVER State: CO Zip: 80290
4. Contact Name: Anna Cillo
Phone: (303) 390-1328
Fax:
Email: anna.cillo@whiting.com

5. API Number 05-123-40213-00
6. County: WELD
7. Well Name: Razor Fed
Well Number: 30K-3106
8. Location: QtrQtr: NESW Section: 30 Township: 10N Range: 58W Meridian: 6
9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 09/07/2015 End Date: 09/14/2015 Date of First Production this formation: 10/16/2015
Perforations Top: 6482 Bottom: 13313 No. Holes: 1157 Hole size: 3

Provide a brief summary of the formation treatment:

Open Hole: [ ]

Stimulation Method: Plug & Perf; Liner Isolation: Cement; Primary Fluid Type: Slickwater (200,461 bbls); Secondary Fluid Type: 15% HCl Acid (709 bbls); Other Fluid Type: Treated Water (3,192 bbls); Proppant Types: Sand 30/50 = 4,746,130 and Sand 40/70 = 115,490; Number of staged intervals: 30; Number of stages perforated: 30

This formation is commingled with another formation: [ ] Yes [X] No

Total fluid used in treatment (bbl): 204362 Max pressure during treatment (psi): 8736
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): 0.80
Total acid used in treatment (bbl): 709 Number of staged intervals: 30
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 15398
Fresh water used in treatment (bbl): 203653 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 4861620 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/07/2015 Hours: 24 Bbl oil: 514 Mcf Gas: 366 Bbl H2O: 1582
Calculated 24 hour rate: Bbl oil: 514 Mcf Gas: 366 Bbl H2O: 1582 GOR: 712
Test Method: Separator Casing PSI: 110 Tubing PSI: 380 Choke Size: 24
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1497 API Gravity Oil: 34
Tubing Size: 2 + 3/8 Tubing Setting Depth: 5978 Tbg setting date: 10/24/2015 Packer Depth: 5978

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: Anna Cillo

Title: Engineering Technician Date: 1/11/2016 Email: anna.cillo@whiting.com

### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400968383	FORM 5A SUBMITTED
400968430	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

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

Total: 0 comment(s)