

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:

401670118

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: 10112
2. Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
3. Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001
4. Contact Name: Adam Johnson
Phone: (918) 526-5505
Fax: (918) 585-1660
Email: regulatory@foundationenergy.com

5. API Number 05-123-19441-00
6. County: WELD
7. Well Name: SHOWERS
Well Number: 32-5-7
8. Location: QtrQtr: SWNW Section: 32 Township: 8N Range: 60W Meridian: 6
9. Field Name: BIRD HAVEN Field Code: 6765

Completed Interval

FORMATION: J SAND Status: ABANDONED Treatment Type: WELLBORE/COMPLETION

Treatment Date: End Date: Date of First Production this formation: 09/20/1997

Perforations Top: 7017 Bottom: 7021 No. Holes: 16 Hole size:

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

No frac or acid job performed

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

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

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

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

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

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

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

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: 05/02/2018 Hours: 10 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 57

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 137 GOR:

Test Method: swab Casing PSI: 0 Tubing PSI: 0 Choke Size: 64

Gas Disposition: Gas Type: Btu Gas: 1000 API Gravity Oil: 1000

Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: Wet

Date formation Abandoned: 05/17/2018 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

** Bridge Plug Depth: 6942 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

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

Signed: _____ Print Name: Bonita Harris

Title: HSE/Regulatory tech Date: _____ Email: bharris@foundationenergy.com
:

Attachment Check List

Att Doc Num **Name**

401670119	CEMENT JOB SUMMARY
401670120	WELLBORE DIAGRAM
401670121	WIRELINER JOB SUMMARY

Total Attach: 3 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)