

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: 401649568

Date Received: 08/07/2018

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: 96850
2. Name of Operator: TEP ROCKY MOUNTAIN LLC
3. Address: PO BOX 370 City: PARACHUTE State: CO Zip: 81635
4. Contact Name: Kellye Garcia Phone: (832) 726-1159 Fax: Email: kgarcia@terraep.com

5. API Number 05-045-06811-00
6. County: GARFIELD
7. Well Name: FEDERAL Well Number: GR 23-11V
8. Location: QtrQtr: NESW Section: 11 Township: 7S Range: 96W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: TEMPORARILY ABANDONED Treatment Type: FRACTURE STIMULATION
Treatment Date: End Date: Date of First Production this formation:
Perforations Top: 4698 Bottom: 6114 No. Holes: 264 Hole size: 35/100
Provide a brief summary of the formation treatment: Open Hole:
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: Hours: Bbl oil: Mcf Gas: Bbl H2O:
Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: Btu Gas: API Gravity Oil:
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: Operator had to temporarily abandon well to make room for drilling operations. Well will return to production following completion of drilling operations.

Date formation Abandoned: 05/18/2018 Squeeze: Yes No If yes, number of sacks cmt

** Bridge Plug Depth: 4606 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

Plug was set via tubing, there is no wireline ticket for this job.

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

Signed: _____ Print Name: Kellye Garcia

Title: Land & Regulatory Tech Date: 8/7/2018 Email kgarcia@terraep.com
:

Attachment Check List

Att Doc Num **Name**

401649568	FORM 5A SUBMITTED
-----------	-------------------

Total Attach: 1 Files

General Comments

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

Permit	-Emailed operator about plug depth, date, and wireline ticket.	08/02/2018
--------	----------------------------------------------------------------	------------

Total: 1 comment(s)