

FORM
5ARev
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



DE ET OE ES

Document Number:

402377308

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: 10110
 2. Name of Operator: GREAT WESTERN OPERATING COMPANY LLC
 3. Address: 1001 17TH STREET #2000
 City: DENVER State: CO Zip: 80202
 4. Contact Name: Renee Kendrick
 Phone: (720) 595-2114
 Fax:
 Email: rkendrick@gwogco.com

5. API Number 05-123-07596-00
 6. County: WELD
 7. Well Name: PIERCE UNIT
 Well Number: 2
 8. Location: QtrQtr: SWSW Section: 23 Township: 8N Range: 66W Meridian: 6
 9. Field Name: PIERCE Field Code: 69000

Completed Interval

FORMATION: LYONS Status: TEMPORARILY ABANDONED Treatment Type:
 Treatment Date: End Date: Date of First Production this formation: 01/25/1973
 Perforations Top: 9144 Bottom: 9188 No. Holes: 88 Hole size:
 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: On 4/1/20, a CIBP was set @ 9090' with 4 sx of cement for a MIT. The plug was left downhole after the test. This well is closed to atmosphere by 5K wellhead. This well will be evaluated for leasehold or P&A'ed as budget allows.

Date formation Abandoned: 04/01/2020 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

** Bridge Plug Depth: 9090 ** Sacks cement on top: 4 ** Wireline and Cement Job Summary must be attached.

Comment:

Great Western was not the original operator of the Pierce Unit 2. Available records do not report the number of holes and hole size. The number of holes was estimated based on the completion report on file.

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

Signed: _____ Print Name: Renee Kendrick

Title: SR Regulatory Analyst Date: _____ Email: rkendrick@gwp.com
:

Attachment Check List

Att Doc Num **Name**

402377499	WIRELINE JOB SUMMARY
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Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)