

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:

402468874

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: 74165 4. Contact Name: Edward Ingve
 2. Name of Operator: RENEGADE OIL & GAS COMPANY LLC Phone: (303) 829-2354
 3. Address: 6155 S MAIN STREET #225 Fax: (303) 680-4907
 City: AURORA State: CO Zip: 80016 Email: ed@renegadeoilandgas.com

5. API Number 05-001-06513-00 6. County: ADAMS
 7. Well Name: FERGUSON Well Number: 5-25
 8. Location: QtrQtr: NWSW Section: 25 Township: 2S Range: 62W Meridian: 6
 9. Field Name: IRONDALE Field Code: 39350

Completed Interval

FORMATION: J SAND Status: COMMINGLED Treatment Type: FRACTURE STIMULATIONTreatment Date: 08/17/2007 End Date: 08/17/2007 Date of First Production this formation: _____Perforations Top: 7164 Bottom: 7182 No. Holes: 48 Hole size: _____

Provide a brief summary of the formation treatment:

Open Hole: ☐

Fracture stimulate new J Sand perforations from 7164'-7170' & 7176'-7182' with 976 barrels gelled water containing 80,980# 20/40 sand down 2 7/8" frac string at 15 BPM and average of 5000 psi. ISIP-2040 psi. 5 min-1845 psi. 10 min-1700 psi. 15 min-1629 psi. 1 hr-1300 psi. 3 hr-950 psi.

This formation is commingled with another formation: ☒ Yes ☐ NoTotal fluid used in treatment (bbl): 976Max pressure during treatment (psi): 6130

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.35

Type of gas used in treatment: _____

Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____

Number of staged intervals: 1

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____

Disposition method for flowback: RECYCLETotal proppant used (lbs): 80980Rule 805 green completion techniques were utilized: ☐Reason why green completion not utilized: PRESSUREFracture 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: _____

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:

This Form 5A for the Ferguson #5-25 is being filed to reflect a J Sand recompletion and commingling from 2007 and not in the records of the COGCC. The J Sand in the well was perforated from 7164'-7170 and 7176'-7182' and swab tested for productivity. Once good pressure and hydrocarbons were confirmed the J Sand was fracture stimulated. The zone was then commingled with the original D Sand perforations of the well. Historical production reports will be reviewed and refiled if necessary to reflect this activity. An additional Form 5 and Form 5A have also been recently filed for 2010 work on the Ferguson #5-25.

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

Signed: _____

Print Name: Edward Ingve _____

Title: Manager/Owner _____

Date: _____

Email : ed@renegadeoilandgas.com _____

Attachment Check List

Att Doc Num **Name**

402468881	WIRELINER JOB SUMMARY
402468882	OPERATIONS SUMMARY

Total Attach: 2 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)