

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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Date Received: 01/20/2011

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: 44390
2. Name of Operator: JAVERNICK OIL
3. Address: 3040 E MAIN City: CANON CITY State: CO Zip: 81212
4. Contact Name: TOM MENHENNETT Phone: (719) 275-3040 Fax: (719) 275-4590 Email: tbm3040@gmail.com

5. API Number 05-043-06170-00
6. County: FREMONT
7. Well Name: ROYAL GORGE Well Number: 9
8. Location: QtrQtr: SWNE Section: 33 Township: 19S Range: 69W Meridian: 6
9. Field Name: FLORENCE-CANON CITY Field Code: 24600

Completed Interval

FORMATION: PIERRE Status: PRODUCING Treatment Type:
Treatment Date: End Date: Date of First Production this formation: 01/14/2010
Perforations Top: 2724 Bottom: 3066 No. Holes: 1000 Hole size: 1/2
Provide a brief summary of the formation treatment: Open Hole: [X]
This formation is commingled with another formation: [] Yes [X] 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: 01/09/2010 Hours: 24 Bbl oil: 5 Mcf Gas: 2 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 5 Mcf Gas: 2 Bbl H2O: 0 GOR: 400
Test Method: swab Casing PSI: 0 Tubing PSI: 0 Choke Size:
Gas Disposition: VENTED Gas Type: DRY Btu Gas: 0 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 2885 Tbg setting date: 01/07/2010 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:

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

Signed: _____ Print Name: SALENE A JAVERNICK
Title: OWNER Date: 12/24/2010 Email: JAVERNICK1@BRESNAN.NET

Attachment List

Att Doc Num **Name**

2592730	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date
Permit	Corrected bottom prod. interval to reflect TD (as this is an open-hole completion).	03/19/2021
Permit	Corrected the following per operator email: -Perforations in uncemented 5-1/2", pre-perfed production string: Top: 2724' – 3034'; No. of holes: 1000 holes (4 spf/250'); hole size: 1/2" -Status: Producing -Swab test date: 1/09/2010 -2-3/8" tubing setting depth: 2885' -Tubing setting date: 1/07/2010	03/19/2021
Permit	Need 2 3/8" tubing setting depth and date.	03/12/2015
Permit	If zone was perfed with 250 holes and the lower perf is 2850 than there must be an uppermost perf depth.	03/12/2015

Total: 4 comment(s)