

FORM
5A
Rev
09/20

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:
402817734

Date Received:
11/11/2021

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: <u>10071</u>	4. Contact Name: <u>Kate Miller</u>
2. Name of Operator: <u>HIGHPOINT OPERATING CORPORATION</u>	Phone: <u>(720) 440-6116</u>
3. Address: <u>555 17TH ST STE 3700</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>regulatory@civiresources.com</u>

5. API Number <u>05-123-46730-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>RSU Anschutz Fed</u>	Well Number: <u>4-61-04-0909CN</u>
8. Location: QtrQtr: <u>Lot 4</u> Section: <u>4</u> Township: <u>4N</u> Range: <u>61W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 08/05/2021 End Date: 08/21/2021 Date this Formation was Completed: 10/18/2021

Perforations Top: 6565 Bottom: 16754 No. Holes: 1290 Hole size: 0.25 Open Hole:

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

43 stage wet shoe plug and perf: 536 bbls 15% HCl, 485,388 bbls slickwater, 5,078,525 lbs 100 Mesh Natural White, 3,317,312 lbs 100 Mesh Premium White, 5,520,707 lbs 40/70 Premium White.
Original completion interval: 14394'-16754'; Recompletion interval: 6565'-14287'.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 485924 Max pressure during treatment (psi): 7507

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.91

Total acid used in treatment (bbl): 536 Number of staged intervals: 43

Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 15841

Fresh water used in treatment (bbl): 485388 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 13916544

Fracture stimulations must be reported on FracFocus.org

Test Information:

10/28/2021 Hours: 24 Bbl oil: 332 Mcf Gas: 49 Bbl H2O: 541

Calculated 24 hour rate: Bbl oil: 332 Mcf Gas: 49 Bbl H2O: 541 GOR: 148

Test Method: Flowing Casing PSI: 386 Tubing PSI: 607 Choke Size: 13/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1346 API Gravity Oil: 38

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6217 Tbg setting date: 09/20/2021 Packer Depth: 6209

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:

1. This was a recompletion. The bottom of the whole completed interval is stated on Form 5A Doc # 402364867.
2. The wellbore beyond the unit boundary setback is physically isolated by: wet shoe sub and float collar
3. HighPoint Operating Corporation certifies that none of the wellbore beyond the unit boundary setback was completed.

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

Signed: _____ Print Name: Jenna Behm

Title: Regulatory Analyst Date: 11/11/2021 Email: regulatory@civiresources.com

Attachment List

Att Doc Num	Name
402817734	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	<ul style="list-style-type: none">• Total fluid used in treatment corrected from 474624 bbls to 485924 bbls per sum of acid and slickwater.• Perf/Prod Interval Bottom corrected from 14287' to 16754' to reflect entire completed interval; recompletion interval added to summary of formation treatment.	11/18/2021

Total: 1 comment(s)