

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:
402753806

Date Received:
08/04/2021

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>10633</u>	4. Contact Name: <u>Lindsey Organ</u>
2. Name of Operator: <u>CRESTONE PEAK RESOURCES OPERATING LLC</u>	Phone: <u>(303) 7743958</u>
3. Address: <u>1801 CALIFORNIA STREET #2500</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>lindsey.organ@crestonepr.com</u>

5. API Number <u>05-005-07453-00</u>	6. County: <u>ARAPAHOE</u>
7. Well Name: <u>STATE MASSIVE 5-65 2-3</u>	Well Number: <u>1CH</u>
8. Location: QtrQtr: <u>SENE</u> Section: <u>2</u> Township: <u>5S</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>DJ HORIZONTAL NIOBRARA</u> Field Code: <u>16950</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 06/01/2021 End Date: 07/04/2021 Date this Formation was Completed: 07/28/2021

Perforations Top: 8461 Bottom: 18057 No. Holes: 1208 Hole size: 42/100 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.

366064 bbls of water, 364 bbls of additives (FRP-22G, Bardac 2250M, T-Chlor 12.5, SAFE-BFH-2, XLS-3Z, BHL-68, ACI-97, ASF-67, LGA-3J) and 1733 bbl HCL in a 48 stage frac with 7896 lbs of DFR-1X and 71531 lbs of silica quartz proppant

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 368161 Max pressure during treatment (psi): 8615

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

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.87

Total acid used in treatment (bbl): 1733 Number of staged intervals: 48

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

Fresh water used in treatment (bbl): 366064 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 71531

Fracture stimulations must be reported on FracFocus.org

Test Information:

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:

First Date of Production, BTU Gas, API Gravity, Tubing Set Data, Flowback Volumes, Test Data were not available at the time of submission. Crestone Peak will submit the information via Form 4 Sundry once it becomes available. Dummy data was used where form required data for submission.

TPZ based on actual top perf: 1268 FNL, 465 FEL Sec 2, 5S, 65W

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

Signed: _____ Print Name: Lindsey Organ

Title: Regulatory Coordinator Date: 8/4/2021 Email: lindsey.organ@crestonepr.com

Attachment List

Att Doc Num	Name
402753806	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	• Test/tubing data not available at time of submission; data submitted on Form 5A (402969059).	07/28/2022

Total: 1 comment(s)