

FORM  
5A

Rev  
09/20

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

403553150

Date Received:

12/07/2023

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: 10633

2. Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

3. Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

4. Contact Name: Elaine Winick

Phone: (303) 294-7806

Fax:

Email: ewinick@civiresources.com

5. API Number 05-123-51941-00

7. Well Name: Cosslett East

8. Location: QtrQtr: SENE Section: 22 Township: 1N Range: 68W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 1G-22H-H168

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING  
Treatment Date: 08/11/2023 End Date: 08/23/2023 Date this Formation was Completed: 11/10/2023  
Perforations Top: 9155 Bottom: 18798 No. Holes: 3246 Hole size: 36/100 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.

Frac'd Niobrara with 56 stage plug and perf;  
7280110 total lbs proppant pumped: 1606412 lbs 40/70 mesh and 5673698 lbs 100 mesh;  
316651 total bbls fluid pumped: 293569 bbls gelled fluid, 179 bbls recycled water, 22226 bbls fresh water and 677 bbls 15% HCl acid.

This formation is commingled with another formation: ☐ Yes ☒ No  
Total fluid used in treatment (bbl): 316651 Max pressure during treatment (psi): 9903  
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.30  
Type of gas used in treatment: Min frac gradient (psi/ft): 0.80  
Total acid used in treatment (bbl): 677 Number of staged intervals: 56  
Recycled or Reused Fluids used in treatment (bbl): 179 Flowback volume recovered (bbl): 0  
Fresh water used in treatment (bbl): 22226 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 7280110

Fracture stimulations must be reported on [FracFocus.org](https://fracfocus.org)

### Test Information:

11/21/2023 Hours: 24 Bbl oil: 584 Mcf Gas: 1363 Bbl H2O: 358  
Date Calculated 24 hour rate: Bbl oil: 584 Mcf Gas: 1363 Bbl H2O: 358 GOR: 2334  
Test Method: flowing Casing PSI: 2418 Tubing PSI: 1524 Choke Size: 20/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1300 API Gravity Oil: 38  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8898 Tbg setting date: 10/24/2023 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:

TPZ 470 FNL & 2403 FWL

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

Signed: Print Name: Elaine Winick  
Title: Completions Tech Date: 12/7/2023 Email: ewinick@civiresources.com

## Attachment List

Att Doc Num	Name
403553150	FORM 5A SUBMITTED
403617629	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
		Stamp Upon Approval

Total: 0 comment(s)