

**FORM  
5A**

Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

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**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: 95715

4. Contact Name: Jessica Donahue

2. Name of Operator: BLACK HILLS EXPLORATION AND PRODUCTION IN

Phone: (720) 210-1333

3. Address: 1515 WYNKOOP STE 500

Fax: (303) 566-3344

City: DENVER State: CO Zip: 80202

5. API Number 05-067-09707-00

6. County: LA PLATA

7. Well Name: Ute

Well Number: 34-41

8. Location: QtrQtr: NESW Section: 34 Township: 33n Range: 8w Meridian: N

Completed Interval

FORMATION: FRUITLAND COALStatus: PRODUCINGTreatment Date: 08/08/2010

Date of First Production this formation: \_\_\_\_\_

Perforations Top: 4004 Bottom: 4210 No. Holes: 204 Hole size: 0.4

Provide a brief summary of the formation treatment:

Open Hole: ☐

7/9/10 – Ran CNL/CBL/GR/CCL log from 4396' to surface. Top of cmt on CBL at 590'. 7/29/10 - Ran sector bond log from 4396' to 3090'. 8/2/10 - Press test 5 1/2" csg to 4200 psi for 30 min. Test OK. 8/3/10 - MIRU perforator and frac equipment. Stage 1- Perf Fruitland Coal 4204-4210', 4spf, .41" diam, 24 holes. 8/8/10 - Broke down perms with 630 gal 15% HCL acid and 33 - 7/8" bioballs. Fraced perms with hybrid pad, 30,000# 20/40 Premium white sand w/Sandwedge in 17# Delta 140 XL gel, 837 bbls total fluid. Set CBP at 4194'. Stage 2 – Perf FC 4153-4155, 4159-4166, 4170-4174', 3spf, .41" diam, 39 holes. Broke down perms with 1470 gal 15% HCL acid and 56 – 7/8" bioballs. Fraced perms with hybrid pad, 17,580# 20/40 Premium white sand w/Sandwedge in 17 & 20# Delta 140 XL gel, 1248 bbls total fluid. Re-perfed FC 4152-4156, 4157-4159, 4159-4161, 4161-4163, 4163-4166, 4170-4173', 3spf, .41" diam, 48 holes. Unable to break down perms. 8/9/10 – Reperfed FC 4153-4156, 4158-4167', 3spf, .40" diam, 36 holes. Broke down perms with 2100 gal 15% HCL and 100 – 7/8" bioballs. Fraced perms with hybrid pad, 27,300# 20/40 Premium white sand w/Sandwedge in 17# Delta 140 XL gel, 1500 bbls total fluid. Set CBP at 4130'. Stage 3 – Perf FC 4004-4007, 4014-4016, 4024-4026, 4032-4036, 4039-4041, 4059-4062, 4077-4080', 3spf, .40" diam, 57 holes. Broke down perms with 2100 gal 15% HCL acid and 80 – 7/8" bioballs. Fraced perms with hybrid pad, 140,300# 20/40 Premium white sand w/Sandwedge in 17# Delta 140 XL gel, 2057 bbls total fluid. Set CBP at 3566'. 8/11/10 - Drill out CBP's. Clean out to PBSD 4404'. On 8/14/10 well tested 0 mcf/d, 0 psi FTP, 3/4" ck, SICP 340 psi. On 8/15/10 landed 2 3/8" 4.7#, J-55 tbg at 4323'. Ran 2 x 1.50 x 16 insert pump on 3/4 & 7/8" rods. Released completion rig on 8/17/10.

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 08/14/2010 Hours: 2 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 16Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 192 GOR: 0Test Method: Flowing Casing PSI: 340 Tubing PSI: \_\_\_\_\_ Choke Size: 3/4Gas Disposition: SOLD Gas Type: COAL GAS BTU Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_Tubing Size: 2 + 3/8 Tubing Setting Depth: 4323 Tbg setting date: 08/17/2010 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: \_\_\_\_\_

Comment:

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

Signed: \_\_\_\_\_ Print Name: Jessica DonahueTitle: Regulatory Technician Date: \_\_\_\_\_ Email Jessica.Donahue@blackhillscorp.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

**Attachment Check List**

Att Doc Num	Name	Doc Description
400092426	WELLBORE DIAGRAM	WBD Ute 34-41 9-7-10.pdf

Total Attach: 1 Files