

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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| DE | ET | OE | ES |
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Document Number:

2071477

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: 8960

4. Contact Name: KERRY MCCOWEN

2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPAN

Phone: (720) 279-2330

3. Address: P O BOX 21974

Fax: (720) 279-2331

City: BAKERSFIELD State: CA Zip: 93390

5. API Number 05-123-27152-00

6. County: WELD

7. Well Name: Antelope

Well Number: 21-18

8. Location: QtrQtr: NENW Section: 18 Township: 5N Range: 62W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING

| | | | |
|-----------------|------------|--|------------|
| Treatment Date: | 08/21/2010 | Date of First Production this formation: | 09/04/2010 |
|-----------------|------------|--|------------|

| | | | | | | | | |
|--------------|------|------|---------|------|------------|----|------------|--------|
| Perforations | Top: | 6256 | Bottom: | 6510 | No. Holes: | 92 | Hole size: | 42/100 |
|--------------|------|------|---------|------|------------|----|------------|--------|

Provide a brief summary of the formation treatment: Open Hole: ☐

CODL 32,004 GAL PAD FLUID AND 96,558 GAL PHASERFRAC GEL W/245,920 LBS 20/40 SAND. ISDP 3083 PSI; ATR 22.5 BPM; ATP 3502 PSI. NBRR 25,242 GAL PAD FLUID AND 112,224 GAL PHASERFRAC GEL WITH 261,710 LBS 30/50 SAND. ISDP 3074 PSI. ATR 51.6 BPM; ATP 3911PSI.

This formation is commingled with another formation: ☒ Yes ☐ No

Test Information:

| | | | | | | | | | |
|-------|------------|--------|----|-----------|----|----------|----|-----------|---|
| Date: | 09/14/2010 | Hours: | 24 | Bbls oil: | 42 | Mcf Gas: | 55 | Bbls H2O: | 1 |
|-------|------------|--------|----|-----------|----|----------|----|-----------|---|

| | | | | | | | |
|--------------------------|-----------|----|----------|----|-----------|---|------|
| Calculated 24 hour rate: | Bbbs oil: | 42 | Mcf Gas: | 55 | Bbbs H2O: | 1 | GOR: |
|--------------------------|-----------|----|----------|----|-----------|---|------|

| | | | |
|----------------------|-----------------|-------------|-------------|
| Test Method: FLOWING | Casing PSI: 700 | Tubing PSI: | Choke Size: |
|----------------------|-----------------|-------------|-------------|

| | | | | | | | |
|------------------|------|-----------|-----|----------|------|------------------|----|
| Gas Disposition: | SOLD | Gas Type: | WET | BTU Gas: | 1311 | API Gravity Oil: | 42 |
|------------------|------|-----------|-----|----------|------|------------------|----|

| | | | |
|--------------|-----------------------|-------------------|---------------|
| 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: _____

Comment:

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

Signed: _____ Print Name: KERRY A. MCCOWEN

Title: VP OPERATIONS Date: 10/6/2010 Email KAM@BONANZACRK.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: David S. Neslin Director of COGCC Date: 12/22/2010

Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 2071477 | FORM 5A SUBMITTED |
| 2071478 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|----------------|---------------------|
| | | |

Total: 0 comment(s)