

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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COMPLETED INTERVAL REPORT

Document Number:

2511079

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: 10177
2. Name of Operator: ENERPLUS RESOURCES (USA) CORPORATION
3. Address: 1700 LINCOLN ST STE 1300
City: DENVER State: CO Zip: 80203
4. Contact Name: AMY WARREN
Phone: (720) 279-5543
Fax: (720) 279-5550

5. API Number 05-075-09384-00
6. County: LOGAN
7. Well Name: KOESTER
Well Number: 6-52-27-44
8. Location: QtrQtr: SESE Section: 27 Township: 6N Range: 52W Meridian: 6
9. Field Name: UNNAMED Field Code: 85251

Completed Interval

FORMATION: SMOKY HILL Status: ABANDONED COMPLETION
Treatment Date: 04/16/2010 Date of First Production this formation:
Perforations Top: 4080 Bottom: 4100 No. Holes: 60 Hole size: 6 + 1/4
Provide a brief summary of the formation treatment: Open Hole:
15.5BBLS 2% KCL WATER WITH 2GPT MAVCIDE II
This formation is commingled with another formation: Yes No
Test Information:
Date: Hours: Bbls oil: Mcf Gas: Bbls H2O:
Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls 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:
BLANKING PLUG GOT STUCK & WIRELINE PARTED WHILE TRYING TO WORK FREE. 40' OF LINE LEFT IN THE HOLE.
Date formation Abandoned: 04/16/2010 Squeeze: Yes No If yes, number of sacks cmt
Bridge Plug Depth: 4000 Sacks cement on top: 2

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: Print Name: AMY WARREN
Title: ENGINEER TECH Date: 7/19/2010 Email: AWRREN@ENERPLUS.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: 1/12/2011

**Attachment Check List**

Att Doc Num	Name
2072101	CEMENT JOB SUMMARY
2511079	FORM 5A SUBMITTED

Total Attach: 2 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REC TKTS	1/12/2011 7:32:31 AM
Permit	req wireline and cmt tkt	12/7/2010 8:23:05 AM

Total: 2 comment(s)