

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 06/30/2011 Date of First Production this formation: 07/06/2011

Perforations Top: 10748 Bottom: 11251 No. Holes: 54 Hole size: 0.36

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

9,547.5 bbls. of slickwater (CWS 600); 59.6 bbls. of 7.5% HCL; 121,000 lbs. 40/70 Prime Plus RCS

This formation is commingled with another formation: Yes No

Test Information:

Date: 07/14/2011 Hours: 1 Bbls oil: 0 Mcf Gas: 29 Bbls H2O: 4

Calculated 24 hour rate: _____ Bbls oil: 7 Mcf Gas: 695 Bbls H2O: 101 GOR: _____

Test Method: Flowing Casing PSI: 1950 Tubing PSI: _____ Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1113 API Gravity Oil: 56

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: _____

FORMATION: ROLLINS Status: PRODUCING

Treatment Date: 07/01/2011 Date of First Production this formation: 07/06/2011

Perforations Top: 10422 Bottom: 10512 No. Holes: 27 Hole size: 0.36

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

6,068 bbls. of slickwater (CWS 600); 42 bbls. of 7.5% HCL; 78,000 lbs. 40/70 Prime Plus RCS

This formation is commingled with another formation: Yes No

Test Information:

Date: 07/14/2011 Hours: 1 Bbls oil: 0 Mcf Gas: 35 Bbls H2O: 5

Calculated 24 hour rate: _____ Bbls oil: 9 Mcf Gas: 835 Bbls H2O: 121 GOR: _____

Test Method: Flowing Casing PSI: 1950 Tubing PSI: _____ Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1113 API Gravity Oil: 56

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: _____

FORMATION: SEGO Status: SHUT IN

Treatment Date: 10/23/2008 Date of First Production this formation: 10/23/2008

Perforations Top: 11328 Bottom: 11722 No. Holes: 17 Hole size: 0.34

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

6,738 bbls. of slickwater; 2,016 gals. of 7.5% HCL; 109,884 lbs. of 40/70 Econoprop.

This formation is commingled with another formation: Yes No

Test Information:

Date: 10/28/2008 Hours: 1 Bbls oil: 0 Mcf Gas: 11 Bbls H2O: 30

Calculated 24 hour rate: _____ Bbls oil: 0 Mcf Gas: 259 Bbls H2O: 726 GOR: 0

Test Method: Flowing Casing PSI: 1700 Tubing PSI: _____ Choke Size: 11/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1113 API Gravity Oil: 0

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: 11534

Reason for Non-Production: _____

Sego Formation is currently shut-in; perms are open. A drillable CIBP is set at 11,300'.

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 07/02/2011 Date of First Production this formation: 07/06/2011

Perforations Top: 9695 Bottom: 10262 No. Holes: 78 Hole size: 0.36

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

16,690 bbls. of slickwater (CWS 600); 72 bbls. of 7.5% HCL; 209,000 lbs. 40/70 Prime Plus RCS

This formation is commingled with another formation: Yes No

Test Information:

Date: 07/14/2011 Hours: 1 Bbls oil: 1 Mcf Gas: 51 Bbls H2O: 7

Calculated 24 hour rate: _____ Bbls oil: 13 Mcf Gas: 1216 Bbls H2O: 176 GOR: _____

Test Method: Flowing Casing PSI: 1950 Tubing PSI: _____ Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1113 API Gravity Oil: 56

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: _____

No new logs were run for the latest completion work.

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

Signed: _____ Print Name: Reed Haddock

Title: Regulatory Analyst Date: _____ Email: rhaddock@basspet.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
400187737	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)