


<b>FORM 5A</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: <div style="text-align: center; font-weight: bold;">400164807</div>	DE	ET	OE	ES
DE	ET	OE	ES				
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: <u>10131</u>		4. Contact Name: <u>Kent Moore</u>					
2. Name of Operator: <u>ST. JAMES ENERGY OPERATING INC</u>		Phone: <u>(970) 301-0291</u>					
3. Address: <u>11177 EAGLE VIEW DR STE 1</u>		Fax: _____					
City: <u>SANDY</u>	State: <u>UT</u>	Zip: <u>84092</u>					
5. API Number <u>05-123-29709-00</u>		6. County: <u>WELD</u>					
7. Well Name: <u>COCKROFT</u>		Well Number: <u>10-4</u>					
8. Location: QtrQtr: <u>SESW</u>	Section: <u>2</u>	Township: <u>6N</u>	Range: <u>64W</u> Meridian: <u>6</u>				
9. Field Name: <u>WATTENBERG</u>		Field Code: <u>90750</u>					
Completed Interval							
FORMATION: <u>NIORARA-CODELL</u>		Status: <u>PRODUCING</u>					
Treatment Date: <u>04/06/2011</u>		Date of First Production this formation: <u>04/08/2011</u>					
Perforations Top: <u>6663</u>	Bottom: <u>6964</u>	No. Holes: <u>144</u>	Hole size: <u>13/32</u>				
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
Codell perforated from 6952-6964, 4 shots per foot, 48- .41" holes. Codell Fractured with 270,000 lbs 20/40 sand, 133,000 gallons fluid. Niobrara B perforated from 6785'-6797', 4 shots per foot, "salt and pepper", 24- .60" and 24- .36" holes. Niobrara A perforated from 6663'-6675', 4 shots per foot, "salt and pepper", 24- .60" and 24- .36" holes. Niobrara A and B fractured with 250,000 lbs 30/50 sand and 170,255 gallons fluid							
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
<b>Test Information:</b>							
Date: <u>04/09/2011</u>	Hours: <u>22</u>	Bbls oil: <u>147</u>	Mcf Gas: <u>162</u> Bbls H2O: <u>148</u>				
Calculated 24 hour rate:		Bbls oil: <u>164</u>	Mcf Gas: <u>181</u> Bbls H2O: <u>165</u> GOR: <u>1104</u>				
Test Method: <u>Flowing</u>	Casing PSI: <u>625</u>	Tubing PSI: _____	Choke Size: <u>14/64</u>				
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	BTU Gas: <u>1009</u>	API Gravity Oil: <u>46</u>				
Tubing Size: _____	Tubing Setting Depth: _____	Tbg setting date: _____	Packer Depth: _____				
Reason for Non-Production: _____							
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____							
Bridge Plug Depth: _____ Sacks cement on top: _____							
Comment: _____							

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

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

Signed: \_\_\_\_\_ Print Name: Dan Hull

Title: Project Manager Date: 5/13/2011 Email dan.hull@lra-inc.com  
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### **Attachment Check List**

Att Doc Num	Name
400164807	FORM 5A SUBMITTED

Total Attach: 1 Files

### **General Comments**

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

Total: 0 comment(s)