

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 columns: DE, ET, OE, ES

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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: 69175
2. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION
3. Address: 1775 SHERMAN STREET - STE 3000
City: DENVER State: CO Zip: 80203
4. Contact Name: Jeff Glossa
Phone: (303) 831-3972
Fax: (303) 860-5838

5. API Number 05-123-33064-00
6. County: WELD
7. Well Name: Frank Trust
Well Number: 14-36H
8. Location: QtrQtr: SWSW Section: 36 Township: 7N Range: 61W Meridian: 6
9. Field Name: MAVERICK Field Code: 53125

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 05/24/2011 Date of First Production this formation: 06/03/2011

Perforations Top: 6890 Bottom: 1067 No. Holes: 0 Hole size:

Provide a brief summary of the formation treatment: Open Hole: []

Stage Frac'd 78705 bbl 24# fluid system with 3996000# 20/40 Sand

This formation is commingled with another formation: [] Yes [X] No

Test Information:

Date: 06/30/2011 Hours: 24 Bbls oil: 301 Mcf Gas: 771 Bbls H2O: 426

Calculated 24 hour rate: Bbls oil: 301 Mcf Gas: 771 Bbls H2O: 426 GOR: 2561

Test Method: Flowing Casing PSI: 640 Tubing PSI: 242 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1457 API Gravity Oil: 39

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5532 Tbg setting date: 06/25/2011 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: Jeff Glossa

Title: Sr Engineering Tech Date: 9/9/2011 Email: jglossa@petd.com

Attachment Check List

Att Doc Num	Name
400203456	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

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