

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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Document Number:

2285053

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 COMPANY

Phone: (720) 440-6100

3. Address: P O BOX 21974

Fax: (720) 279-2331

City: BAKERSFIELD State: CA Zip: 93390

5. API Number 05-123-20086-00

6. County: WELD

7. Well Name: PERKINS

Well Number: 12-27

8. Location: QtrQtr: SWNW Section: 27

Township: 5N

Range: 63W

Meridian: 6

9. Field Name: WATTENBERG

Field Code: 90750

### Completed Interval

FORMATION: <u>CODELL</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>01/14/2005</u>	Date of First Production this formation: <u>01/31/2005</u>
Perforations Top: <u>6494</u> Bottom: <u>6505</u>	No. Holes: <u>44</u> Hole size: <u>38/100</u>
Provide a brief summary of the formation treatment: <u>Open Hole: <input type="checkbox"/></u>	
STIMULATED WITH 225,420# OF SAND AND 106,174 GALS OF FLUID. AVERAGE TREATING PRESSURE WAS 3100 PSI WITH AN AVERAGE TREATMENT RATE OF 16.2 BPM.	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Test Information:</b>	
Date: <u>02/03/2005</u> Hours: <u>24</u>	Bbls oil: <u>68</u> Mcf Gas: <u>10</u> Bbls H2O: <u>45</u>
Calculated 24 hour rate:	Bbls oil: <u>68</u> Mcf Gas: <u>10</u> Bbls H2O: <u>45</u> GOR: <u>147</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>500</u> Tubing PSI: <u>200</u> Choke Size: <u>18/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u> BTU Gas: <u>1111</u> API Gravity Oil: <u>1111</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: _____	

FORMATION: <u>J-CODELL</u>	Status: <u>PRODUCING</u>
Treatment Date: _____	Date of First Production this formation: _____
Perforations Top: <u>6494</u> Bottom: <u>7002</u>	No. Holes: _____ Hole size: _____
Provide a brief summary of the formation treatment: <u>Open Hole: <input type="checkbox"/></u>	
COMMINGLED CD AND J-SAND FORMATIONS ON 04/08/2005.	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Test Information:</b>	
Date: <u>04/08/2005</u> Hours: _____	Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____
Calculated 24 hour rate:	Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____
Test Method: <u>FLOWING</u>	Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
Gas Disposition: _____	Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6995</u> 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:

CORRECTED FORM NIOBRARA WAS NEVER PERFERED.

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: 10/6/2011

Email : KAM@BONANZACRK.COM

**Attachment Check List**

Att Doc Num	Name
2285053	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>
Data Entry	CHECK FORMATION CODELL: BOTH BTU GAS AND API GRAVITY OIL MUST BE ENTERED IF MCF GAS AND BBLS OIL ARE ENTERED.	11/10/2011 12:38:04 PM

Total: 1 comment(s)