

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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| DE | ET | OE | ES |
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Document Number:

400229690

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

5. API Number 05-045-16105-00 6. County: GARFIELD  
7. Well Name: Puckett Well Number: 11C-24D  
8. Location: QtrQtr: NWNW Section: 24 Township: 6S Range: 97W Meridian: 6  
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

|   |  |
|---|--|
| FORMATION: <u>WILLIAMS FORK - CAMEO</u>   | Status: <u>PRODUCING</u>                                   |
| Treatment Date: <u>09/16/2011</u>   | Date of First Production this formation: <u>10/21/2011</u> |
| Perforations Top: <u>8110</u> Bottom: <u>8665</u>   | No. Holes: <u>72</u> Hole size: <u>5/16</u>                |
| Provide a brief summary of the formation treatment: <u>Open Hole: <input type="checkbox"/></u>  |  |
| <u>Frac'd using 16556 bbls of slickwater gel and 205400# of 30/50 Ottawa, 103973# 30/50 Tejas gold</u>                                  |  |
| This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                |  |
| <b>Test Information:</b>  |  |
| Date: <u>11/01/2011</u> Hours: <u>24</u> Bbls oil: <u>1</u> Mcf Gas: <u>357</u> Bbls H2O: <u>11</u>                                     |  |
| Calculated 24 hour rate: Bbls oil: <u>1</u> Mcf Gas: <u>357</u> Bbls H2O: <u>11</u> GOR: <u>35700</u>                                   |  |
| Test Method: <u>Flowing</u> Casing PSI: <u>782</u> Tubing PSI: <u>425</u> Choke Size: <u>24/64</u>                                      |  |
| Gas Disposition: <u>SOLD</u> Gas Type: <u>WET</u> BTU Gas: <u>1073</u> API Gravity Oil: <u>58</u>                                       |  |
| Tubing Size: <u>2 + 3/8</u> Tubing Setting Depth: <u>8718</u> Tbg setting date: <u>10/10/2011</u> Packer Depth: <u></u>                 |  |
| Reason for Non-Production: <u></u>  |  |
| Date formation Abandoned: <u></u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt <u></u> |  |
| Bridge Plug Depth: <u></u> Sacks cement on top: <u></u>   |  |

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: 12/6/2011 Email: jpglossa@petd.com

### Attachment Check List

| Att Doc Num | Name              |
|-------------|-------------------|
| 400229690   | FORM 5A SUBMITTED |

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)