

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

Document Number: 2588564

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: 55575
2. Name of Operator: MCELVAIN ENERGY INC
3. Address: 1050 17TH ST STE 2500
City: DENVER State: CO Zip: 80265-
4. Contact Name: DEB POWELL
Phone: (303) 893-0933
Fax: (303) 893-0914

5. API Number 05-125-11435-00
6. County: YUMA
7. Well Name: Pyramid
Well Number: 13-1
8. Location: QtrQtr: NE NE Section: 13 Township: 2S Range: 47W Meridian: 6
9. Field Name: MILDRED WEST Field Code: 54985

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING
Treatment Date: 08/30/2011 Date of First Production this formation: 09/02/2011
Perforations Top: 2454 Bottom: 2484 No. Holes: 90 Hole size: 40/100
Provide a brief summary of the formation treatment: Open Hole: [ ]
60.13 TONS OF CO2, 50,180# 16/30 SAND, 42,040# 12/20 SAND, 500 GAL 7.5% HCL, 110 GAL SCALE INHIBITER.
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 09/02/2011 Hours: 10 Bbls oil: 0 Mcf Gas: 50 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 120 Bbls H2O: 0 GOR:
Test Method: FLOW BACK Casing PSI: 430 Tubing PSI: 140 Choke Size: 3/8
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 0 API Gravity Oil: 0
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:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: Print Name: DEBORAH POWELL
Title: ENG TECH MANAGER Date: 9/9/2011 Email: DEBBYP@MCELVAIN.COM

### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
2588564	FORM 5A SUBMITTED
2588565	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Email to opr rqst LAS logs 1/20/12 NKP	1/20/2012 3:56:59 PM

Total: 1 comment(s)