

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 2331132

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: 10167
2. Name of Operator: COMET RIDGE USA INC
3. Address: 600 17TH ST STE 800S
City: DENVER State: CO Zip: 80202-
4. Contact Name: PAUL GOTTLÖB
Phone: (303) 226-1316
Fax: (303) 226-1301

5. API Number 05-107-06231-00
6. County: ROUTT
7. Well Name: PELTIER
Well Number: 11-12
8. Location: QtrQtr: SENW Section: 11 Township: 6N Range: 87W Meridian: 6
9. Field Name: BEAR RIVER Field Code: 5950

Completed Interval

FORMATION: NIOBRARA Status: SHUT IN

Treatment Date: 02/26/2007 Date of First Production this formation: 02/08/2007

Perforations Top: 5504 Bottom: 6566 No. Holes: 2820 Hole size: 1/2

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

5-1/2" PERFORATED PRODUCTION CSG. F/5504'-5629', 4 HPF @ 1/2"
5-1/2" PERFORATED PRODUCTION CSG. F/5986'-6566', 4 HPF @ 1/2"

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

Test Information:

Date: 02/26/2007 Hours: 7 Bbls oil: 188 Mcf Gas: 0 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 564 Mcf Gas: 0 Bbls H2O: 0 GOR: 0

Test Method: Flowing Casing PSI: Tubing PSI: Choke Size:

Gas Disposition: Gas Type: BTU Gas: 0 API Gravity Oil: 38

Tubing Size: 2 + 7/8 Tubing Setting Depth: 6251 Tbg setting date: 02/25/2007 Packer Depth: 3691

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: PAUL GOTTLÖB

Title: SR. ENGINEERING TECH Date: 1/18/2012 Email PAUL.GOTTLÖB@

Attachment Check List

Att Doc Num	Name
2331132	FORM 5A SUBMITTED
2331133	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)