

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: 400266009

Date Received:

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: 10340
2. Name of Operator: SUNDANCE ENERGY INC
3. Address: 633 17TH STREET #1950
City: DENVER State: CO Zip: 80202
4. Contact Name: Dean Rogers
Phone: (303) 543-5710
Fax: (303) 543-5701

5. API Number 05-123-34986-00
6. County: WELD
7. Well Name: Lamb
Well Number: 15C
8. Location: QtrQtr: NENE Section: 15 Township: 4N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING
Treatment Date: 02/29/2012 Date of First Production this formation: 03/09/2012
Perforations Top: 6932 Bottom: 6954 No. Holes: 88 Hole size: 0.38
Provide a brief summary of the formation treatment: Open Hole: [ ]
205,000 gal and 153,620# of 20/40 sand
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 03/11/2012 Hours: 24 Bbls oil: 53 Mcf Gas: 33 Bbls H2O: 28
Calculated 24 hour rate: Bbls oil: 53 Mcf Gas: 33 Bbls H2O: 28 GOR: 600
Test Method: Flow Casing PSI: 1200 Tubing PSI: Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1250 API Gravity Oil: 47
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: Dean Rogers
Title: Operations Engineer Date: Email drogers@sundanceenergy.net

### Attachment Check List

Att Doc Num	Name
400266013	WELLBORE DIAGRAM

Total Attach: 1 Files

#### General Comments

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

Total: 0 comment(s)