

FORM
5A

Rev
06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400276566

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: 95960
2. Name of Operator: WEXPRO COMPANY
3. Address: P O BOX 45003
City: SALT LAKE CITY State: UT Zip: 84145-
4. Contact Name: Jim Horner
Phone: (307) 352-7523
Fax: (307) 352-7575

5. API Number 05-081-07619-00
6. County: MOFFAT
7. Well Name: B.W. MUSSER
Well Number: 39
8. Location: QtrQtr: NENE Section: 4 Township: 11N Range: 97W Meridian: 6
9. Field Name: POWDER WASH Field Code: 69800

Completed Interval

FORMATION: FORT UNION Status: PRODUCING Treatment Type: FRACTURE
Treatment Date: 02/15/2012 End Date: 02/15/2012 Date of First Production this formation: 03/05/2012
Perforations Top: 6188 Bottom: 9048 No. Holes: 174 Hole size: 1/3

Provide a brief summary of the formation treatment:

Open Hole: ☐

398,821 GAL DELTA 140 W/ N2 517,500# OF 20/40 OTTAWA 40,052# OF 100 MESH

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl):

Max pressure during treatment (psi):

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment:

Number of staged intervals:

Total acid used in treatment (bbl):

Max frac gradient (psi/ft):

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback:

Total proppant used (lbs):

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 03/05/2012 Hours: 6 Bbl oil: 0 Mcf Gas: 228 Bbl H2O: 17
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 912 Bbl H2O: 69 GOR: 13
Test Method: flowing Casing PSI: 437 Tubing PSI: 235 Choke Size: 32/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 15 API Gravity Oil: 58
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6054 Tbg setting date: 03/01/2012 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: Chris Beilby

Title: Completion Manager Date: _____ Email chris.beilby@questar.com
:

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)