

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:

400280213

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: 10261
2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION
3. Address: 730 17TH ST STE 610
City: DENVER State: CO Zip: 80202
4. Contact Name: CLAYTON DOKE
Phone: (970) 669-7411
Fax: (970) 669-4077

5. API Number 05-123-34203-00
6. County: WELD
7. Well Name: Wilson
Well Number: 3-26
8. Location: QtrQtr: NENW Section: 26 Township: 7N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE
Treatment Date: 11/12/2011 End Date: 11/12/2011 Date of First Production this formation: 11/26/2011
Perforations Top: 7040 Bottom: 7053 No. Holes: 52 Hole size: 042/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

219,508 gals, 146,935 gals SLF, 1,000 gals 15% HCl acid, 152,280 lbs 30/50 White

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

Total fluid used in treatment (bbl): 5226

Max pressure during treatment (psi): 5268

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal): 0.25

Type of gas used in treatment:

Number of staged intervals: 1

Total acid used in treatment (bbl): 23

Max frac gradient (psi/ft): 0.87

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl): 5250

Fresh water used in treatment (bbl): 1728

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 152280

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/10/2011 Hours: 24 Bbl oil: 148 Mcf Gas: 103 Bbl H2O: 11
Calculated 24 hour rate: Bbl oil: 148 Mcf Gas: 103 Bbl H2O: 11 GOR: 696
Test Method: Flowing Casing PSI: 1000 Tubing PSI: Choke Size: 012/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1298 API Gravity Oil: 43
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7027 Tbg setting date: 02/01/2012 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:

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: _____
Treatment Date: 11/12/2011 End Date: _____ Date of First Production this formation: 11/26/2011
Perforations Top: 6881 Bottom: 6956 No. Holes: 96 Hole size: 042/100
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

296,127 gals FR water, 203,097 gals SLF, 180,620 lbs 30/50 White

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

Total fluid used in treatment (bbl): 7051

Max pressure during treatment (psi): 5214

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 0.25

Type of gas used in treatment: _____

Number of staged intervals: 1

Total acid used in treatment (bbl): _____

Max frac gradient (psi/ft): 0.90

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): 7051

Fresh water used in treatment (bbl): 2215

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 180620

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/10/2011 Hours: 24 Bbl oil: 148 Mcf Gas: 103 Bbl H2O: 11
Calculated 24 hour rate: Bbl oil: 148 Mcf Gas: 103 Bbl H2O: 11 GOR: 696
Test Method: Flowing Casing PSI: 1000 Tubing PSI: _____ Choke Size: 12/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1298 API Gravity Oil: 43
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7027 Tbg setting date: 02/01/2012 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: Clayton Duke

Title: Consultant Date: _____ Email: cdoke@petersonenergy.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)