

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400314513

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: 75027
2. Name of Operator: ROSEWOOD RESOURCES INC
3. Address: 2101 CEDAR SPRINGS RD STE 1500
City: DALLAS State: TX Zip: 75201
4. Contact Name: Stacey Owston
Phone: (970) 848-2228 x102
Fax: (970) 848-2245

5. API Number 05-125-11978-00
6. County: YUMA
7. Well Name: JP Brophy Federal
Well Number: 14-21 4N45W
8. Location: QtrQtr: SWSW Section: 21 Township: 4N Range: 45W Meridian: 6
9. Field Name: OLD BALDY Field Code: 60630

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/29/2011 End Date: 01/13/2012 Date of First Production this formation: 01/23/2012

Perforations Top: 2596 Bottom: 2622 No. Holes: 52 Hole size: 3 + 1/8

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

49,082 GAL OF FRAC W/ 30# GEL & 70 QUALITY MAV FOAM, 100,080# OF 16/30 TEXAS GOLD SAND W/ 435,000 SCF N2

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

Total fluid used in treatment (bbl): 368 Max pressure during treatment (psi): 1628
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 2.04
Type of gas used in treatment: NITROGEN Max frac gradient (psi/ft): 0.02
Total acid used in treatment (bbl): 12 Number of staged intervals: 5
Recycled water used in treatment (bbl): 184 Flowback volume recovered (bbl): 297
Fresh water used in treatment (bbl): 184 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 100080 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/19/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 324 Bbl H2O: 278
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 358 Bbl H2O: 297 GOR: 0
Test Method: VENTED Casing PSI: 60 Tubing PSI: 0 Choke Size: 28/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1060 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: ** Wireline and Cement Job Summary must be attached.

Comment:

Please feel free to contact me with any questions.

Thank You

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Stacey Owston

Title: Administrative Assistant Date: _____ Email sowston@rosewd.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)