

**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



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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: <u>10232</u>	4. Contact Name: <u>RANDY NATVIG</u>
2. Name of Operator: <u>LARAMIE ENERGY II, LLC</u>	Phone: <u>(303) 339-4400</u>
3. Address: <u>1512 LARIMER ST STE 1000</u>	Fax: <u>(303) 339-4399</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-045-15781-00</u>	6. County: <u>GARFIELD</u>
7. Well Name: <u>FEDERAL</u>	Well Number: <u>29-02B</u>
8. Location: QtrQtr: <u>NWNE</u> Section: <u>29</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u>	
9. Field Name: <u>RULISON</u> Field Code: <u>75400</u>	

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/11/2008 End Date: Date of First Production this formation: 11/20/2008

Perforations Top: 6726 Bottom: 8324 No. Holes: 168 Hole size: 35/100

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

1,161,780 GALS. SLICKWATER
671,700 # 20/40 WHITE SAND
3,500 GALS. 15% HCL ACID

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: Max frac gradient (psi/ft):

Total acid used in treatment (bbl): Number of staged intervals:

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: 12/06/2008 Hours: 24 Bbl oil: 0 Mcf Gas: 826 Bbl H2O: 96

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 826 Bbl H2O: 96 GOR: 0

Test Method: Flowing Casing PSI: 650 Tubing PSI: Choke Size: 20

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1100 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8797 Tbg setting date: 12/10/2008 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:

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

Signed: Print Name: RANDY NATVIG

Title: DRILLING & COMPLETION Date: 6/4/2012 Email: RNATVIG@LARAMIE-ENERGY.COM

Attachment Check List

Att Doc Num	Name
2237056	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)