

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 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 05-123-34214-00 6. County: WELD 7. Well Name: Bears 8. Location: QtrQtr: SWNW Section: 30 Township: 7N Range: 66W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: SHUT IN Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/20/2011 End Date: 12/20/2011 Date of First Production this formation: Perforations Top: 7447 Bottom: 7465 No. Holes: 72 Hole size: 04/10

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

277,389 gals, (180,407 gals SLF), 180,080 lbs 30/50 White

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

Total fluid used in treatment (bbl): 6605 Max pressure during treatment (psi): 5675 Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 0.25 Type of gas used in treatment: Max frac gradient (psi/ft): 0.90 Total acid used in treatment (bbl): Number of staged intervals: 1 Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 6720 Fresh water used in treatment (bbl): 2309 Disposition method for flowback: DISPOSAL Total proppant used (lbs): 180080 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: Hours: Bbl oil: Mcf Gas: Bbl H2O: Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR: Test Method: Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: API Gravity Oil: 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: 7435 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/12/2011 End Date: 11/12/2011 Date of First Production this formation: 02/01/2012
Perforations Top: 7134 Bottom: 7370 No. Holes: 320 Hole size: 043/100

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

NBRR A- 202,313 gals, (109,333 gals SLF), 102,680 lbs 30/50 White
NBRR B- 220,796 gals, (165,789 gals SLF), 150,060 lbs 30/50 White
NBRR C- 209,977 gals, (114,758 gals SLF), 100,860 lbs 30/50 White

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 15073 Max pressure during treatment (psi): 5870

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 0.25

Type of gas used in treatment: Max frac gradient (psi/ft): 1.02

Total acid used in treatment (bbl): 24 Number of staged intervals: 3

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 15188

Fresh water used in treatment (bbl): 5791 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 353600 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: 02/23/2012 Hours: 10 Bbl oil: 54 Mcf Gas: 35 Bbl H2O: 7

Calculated 24 hour rate: Bbl oil: 130 Mcf Gas: 84 Bbl H2O: 17 GOR: 648

Test Method: Flowing Casing PSI: 1040 Tubing PSI: Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1210 API Gravity Oil: 43

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:

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

Signed: Print Name: CLAYTON DOKE

Title: Consultant Date: 6/7/2012 Email: cdoke@petersonenergy.com

Attachment Check List

Att Doc Num	Name
400262470	FORM 5A SUBMITTED
400292259	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)