

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

5. API Number 05-123-29427-00 6. County: WELD
7. Well Name: J&L FARMS Well Number: 22-20
8. Location: QtrQtr: SENW Section: 20 Township: 6N Range: 63W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/20/2011 End Date: 10/22/2011 Date of First Production this formation: 11/12/2011
Perforations Top: 6572 Bottom: 6602 No. Holes: 120 Hole size: 037/100

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

45179 gal pad, 169,613 gal sand-laden fluid w/ 150,013 lbs 30/50 sand.

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

Total fluid used in treatment (bbl): 5269 Max pressure during treatment (psi): 5277
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 0.25
Type of gas used in treatment: Min frac gradient (psi/ft): 0.93
Total acid used in treatment (bbl): 23 Number of staged intervals: 1
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 5395
Fresh water used in treatment (bbl): 1231 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 150013 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: 11/22/2011 Hours: 3 Bbl oil: 10 Mcf Gas: 20 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 80 Mcf Gas: 160 Bbl H2O: 0 GOR: 2000
Test Method: Flowing Casing PSI: 1200 Tubing PSI: Choke Size: 016/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1359 API Gravity Oil: 45
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6559 Tbg setting date: 11/04/2011 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:

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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  
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### **Attachment Check List**

Att Doc Num	Name

Total Attach: Files

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