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: 400328583

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: 10340
2. Name of Operator: SUNDANCE ENERGY INC
3. Address: 633 17TH STREET #1950
City: DENVER State: CO Zip: 80202
4. Contact Name: Dean Rogers
Phone: (303) 543-5710
Fax: (303) 543-5701

5. API Number 05-123-34986-00
6. County: WELD
7. Well Name: Lamb
Well Number: 15C
8. Location: QtrQtr: NENE Section: 15 Township: 4N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/29/2012 End Date: 02/29/2012 Date of First Production this formation: 03/09/2012

Perforations Top: 6932 Bottom: 6954 No. Holes: 88 Hole size:

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

Frac with 205,000 gal of water and 153,620# of sand

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

Total fluid used in treatment (bbl): 4884
Max pressure during treatment (psi): 5257
Total gas used in treatment (mcf): 0
Fluid density at initial fracture (lbs/gal):
Type of gas used in treatment:
Min frac gradient (psi/ft):
Total acid used in treatment (bbl): 0
Number of staged intervals: 1
Recycled water used in treatment (bbl): 0
Flowback volume recovered (bbl): 1915
Fresh water used in treatment (bbl): 4884
Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 153620
Rule 805 green completion techniques were utilized: ☐
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 03/12/2012 Hours: 24 Bbl oil: 58 Mcf Gas: 56 Bbl H2O: 28

Calculated 24 hour rate: Bbl oil: 58 Mcf Gas: 56 Bbl H2O: 28 GOR: 966

Test Method: Flow Casing PSI: 800 Tubing PSI: Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1250 API Gravity Oil: 46

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6889 Tbg setting date: 05/10/2012 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: ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation:

Perforations Top: 6620 Bottom: 6954 No. Holes: 132 Hole size:

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

Perf the Niobrara 6620-6794 with 44 holes, .38"
Perf the Codell 6932-54 with 88 holes, .38"

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: Min 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: 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: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/23/2012 End Date: 04/23/2012 Date of First Production this formation: 04/28/2012

Perforations Top: 6620 Bottom: 6794 No. Holes: 44 Hole size:

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

Frac with 210,432 gal of water and 154,380# of sand

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

Total fluid used in treatment (bbl): 4148 Max pressure during treatment (psi): 5533

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

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

Total acid used in treatment (bbl): 0 Number of staged intervals: 1

Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 1949

Fresh water used in treatment (bbl): 4148 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 154380 Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/28/2012 Hours: 24 Bbl oil: 11 Mcf Gas: 17 Bbl H2O: 20

Calculated 24 hour rate: Bbl oil: 11 Mcf Gas: 17 Bbl H2O: 20 GOR: 1545

Test Method: Flow Casing PSI: 500 Tubing PSI: Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1250 API Gravity Oil: 46

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6889 Tbg setting date: 05/10/2012 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: ** 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: Dean Rogers

Title: Operations Engineer Date: Email: drogers@sundanceenergy.net

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)