

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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Document Number:

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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: 96340
2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC
3. Address: 4600 S DOWNING ST
City: ENGLEWOOD State: CO Zip: 80113
4. Contact Name: Jack Fincham
Phone: (303) 906-3335
Fax: (303) 761-9067

5. API Number 05-073-06449-00
6. County: LINCOLN
7. Well Name: Kerry
Well Number: # 5
8. Location: QtrQtr: NWNE Section: 20 Township: 10S Range: 55W Meridian: 6
9. Field Name: GREAT PLAINS Field Code: 32756

Completed Interval

FORMATION: KEYES Status: DRY AND ABANDONED Treatment Type: ACID JOB
Treatment Date: 08/15/2012 End Date: 08/16/2012 Date of First Production this formation:
Perforations Top: 7804 Bottom: 7820 No. Holes: 64 Hole size: 1/4

Provide a brief summary of the formation treatment:

Open Hole: ☐

Acid Job 38 bbl 15% HCL, 46 bbl 2% KCL

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

Total fluid used in treatment (bbl): 84

Max pressure during treatment (psi): 1040

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): 38

Number of staged intervals:

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl): 94

Fresh water used in treatment (bbl): 46

Disposition method for flowback: DISPOSAL

Total proppant used (lbs):

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: 08/15/2012 Hours: 8 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 94
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 282 GOR:
Test Method: SWAB Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0
Tubing Size: 2 + 7/8 Tubing Setting Depth: 7772 Tbg setting date: 08/15/2012 Packer Depth: 7772

Reason for Non-Production: None Commercial

Date formation Abandoned: 08/16/2012 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

** Bridge Plug Depth: 7794 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

FORMATION: MORROW V-11		Status: DRY AND ABANDONED		Treatment Type: ACID JOB	
Treatment Date: 08/16/2012		End Date: 09/17/2012		Date of First Production this formation:	
Perforations	Top: 7712	Bottom: 7729	No. Holes: 68	Hole size: 1/4	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Acid Job 9 bbl 12.50% HCL, 45 bbl 4% KCL					
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total fluid used in treatment (bbl): 54		Max pressure during treatment (psi): 1400			
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): 9		Number of staged intervals:			
Recycled water used in treatment (bbl):		Flowback volume recovered (bbl): 84			
Fresh water used in treatment (bbl): 45		Disposition method for flowback: DISPOSAL			
Total proppant used (lbs):		Rule 805 green completion techniques were utilized: <input type="checkbox"/>			
			Reason why green completion not utilized: PIPELINE		
Fracture stimulations must be reported on FracFocus.org					
<u>Test Information:</u>					
Date: 08/17/2012	Hours: 8	Bbl oil: 0	Mcf Gas: 0	Bbl H2O: 84	
Calculated 24 hour rate:	Bbl oil: 0	Mcf Gas: 0	Bbl H2O: 252	GOR:	
Test Method: SWAB	Casing PSI:	Tubing PSI:	Choke Size:		
Gas Disposition:	Gas Type:	Btu Gas: 0	API Gravity Oil: 0		
Tubing Size: 2 + 7/8	Tubing Setting Depth: 7675	Tbg setting date: 08/17/2012	Packer Depth: 7675		
Reason for Non-Production: None Commercial					
Date formation Abandoned: 08/22/2012	Squeeze: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, number of sacks cmt			
** Bridge Plug Depth: 7010	** Sacks cement on top: 2	** Wireline and Cement Job Summary must be attached.			

FORMATION: PAWNEE B Status: PRODUCING Treatment Type: ACID JOB
Treatment Date: 08/22/2012 End Date: 08/23/2012 Date of First Production this formation: 09/01/2012
Perforations Top: 6964 Bottom: 6972 No. Holes: 32 Hole size: 1/4
Provide a brief summary of the formation treatment: Open Hole: ☐

Acid Job 19 bbl 12.5% HCL, 42 bbl 2.5% KCL

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

Total fluid used in treatment (bbl): 61

Max pressure during treatment (psi): 1200

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): 19

Number of staged intervals:

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl): 102

Fresh water used in treatment (bbl): 42

Disposition method for flowback: DISPOSAL

Total proppant used (lbs):

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: 08/22/2012 Hours: 8 Bbl oil: 8 Mcf Gas: 0 Bbl H2O: 26

Calculated 24 hour rate: Bbl oil: 24 Mcf Gas: 0 Bbl H2O: 78 GOR:

Test Method: SWAB Casing PSI: Tubing PSI: Choke Size:

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 35

Tubing Size: 2 + 7/8 Tubing Setting Depth: 6903 Tbg setting date: 08/22/2012 Packer Depth: 6903

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: Jack Fincham

Title: Agent Date: Email fincham4@msn.com

Attachment Check List

Att Doc Num	Name
400328970	WELLBORE DIAGRAM
400330247	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)