

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 05-123-34744-00 6. County: WELD 7. Well Name: Bosworth-Bailey Well Number: 9-31 8. Location: QtrQtr: SESE Section: 31 Township: 7N Range: 66W Meridian: 6 9. Field Name: EATON Field Code: 19350

Completed Interval

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

Treatment Date: 03/12/2012 End Date: 03/12/2012 Date of First Production this formation: Perforations Top: 7606 Bottom: 7624 No. Holes: 72 Hole size: 042/100

Provide a brief summary of the formation treatment: Open Hole: 273,761 gals, 176,653 gals SLF, 181,120 lbs 30/50 White

This formation is commingled with another formation: Total fluid used in treatment (bbl): 6518 Max pressure during treatment (psi): 5552 Total gas used in treatment (mcf): Type of gas used in treatment: Fluid density at initial fracture (lbs/gal): 0.25 Min frac gradient (psi/ft): 0.95 Total acid used in treatment (bbl): Number of staged intervals: 1 Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 6518 Fresh water used in treatment (bbl): 2312 Disposition method for flowback: DISPOSAL Total proppant used (lbs): 181120 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: 7576 \*\* Sacks cement on top: \*\* Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/15/2012 End Date: 03/15/2012 Date of First Production this formation: 04/05/2012  
Perforations Top: 7294 Bottom: 7524 No. Holes: 120 Hole size: 042/100

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

NBRR A- 210,336 gals FR water, 154,286 SLF with 119,380# 30/50 White  
NBRR B- 304,668 gals FR water, 212,898 SLF, with 212,613 #'s 30/50 White  
NBRR C- 176,089 gals FR water, 111,280 gals SLF, 74,200 lbs 30/50 White

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 16455 Max pressure during treatment (psi): 5955

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): 1.02

Total acid used in treatment (bbl): 47 Number of staged intervals: 3

Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 16456

Fresh water used in treatment (bbl): 5063 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 406193 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: 04/26/2012 Hours: 12 Bbl oil: 90 Mcf Gas: 79 Bbl H2O: 20

Calculated 24 hour rate: Bbl oil: 180 Mcf Gas: 158 Bbl H2O: 40 GOR: 878

Test Method: Flowing Casing PSI: 1650 Tubing PSI: Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1323 API Gravity Oil: 44

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: JONATHAN RUNGE  
Title: Consultant Date: 6/14/2012 Email: jrunge@petersonenergy.com

**Attachment Check List**

Att Doc Num	Name
400262843	FORM 5A SUBMITTED
400293623	WIRELINE JOB SUMMARY

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)