

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



Table with columns DE, ET, OE, ES

Document Number: 400351847

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: 57667 4. Contact Name: CLAYTON DOKE
2. Name of Operator: MINERAL RESOURCES, INC. Phone: (970) 669-7411
3. Address: PO BOX 328 City: GREELEY State: CO Zip: 80632 Fax: (970) 669-4077

5. API Number 05-123-33975-00 6. County: WELD
7. Well Name: WESTBONE Well Number: 1-3-22
8. Location: QtrQtr: NWSE Section: 22 Township: 5N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/07/2011 End Date: 10/07/2011 Date of First Production this formation:

Perforations Top: 7744 Bottom: 7754 No. Holes: 40 Hole size: 042/100

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

115,586 gals (19,987 FR water, 89,717 gals pHaserfrac, 5,878 gals fresh), 250,000 lbs 30/50 White.

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

Total fluid used in treatment (bbl): 2752 Max pressure during treatment (psi): 6116

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: Min frac gradient (psi/ft): 0.83

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

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

Fresh water used in treatment (bbl): 2752 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 250000 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: \*\* 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: 01/25/2012

Perforations Top: 7425 Bottom: 7754 No. Holes: 112 Hole size: 042/100

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

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: 02/11/2012 Hours: 24 Bbl oil: 24 Mcf Gas: 268 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 24 Mcf Gas: 268 Bbl H2O: 0 GOR: 11

Test Method: Flowing Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1237 API Gravity Oil: 58

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7719 Tbg setting date: 02/24/2012 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 Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/08/2011 End Date: 10/08/2011 Date of First Production this formation:
Perforations Top: 7425 Bottom: 7569 No. Holes: 72 Hole size: 042/100

Provide a brief summary of the formation treatment: Open Hole:
140,870 gals (33,482 FR water, 101,716 gals pHaserfrac, 1,000 gals acid, 5,675 gals fresh), 250,000 lbs 30/50 White.

This formation is commingled with another formation: [X] Yes [ ] No
Total fluid used in treatment (bbl): 3354 Max pressure during treatment (psi): 5966
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.30
Type of gas used in treatment: Min frac gradient (psi/ft): 0.91
Total acid used in treatment (bbl): 24 Number of staged intervals: 1
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): 3330 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 250000 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: \*\* 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: PETROLEUM ENGINEER Date: Email: cdoke@petersonenergy.com

Attachment Check List

Table with 2 columns: Att Doc Num, Name. Row 1: 400353219, WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

Table with 3 columns: User Group, Comment, Comment Date

Total: 0 comment(s)