

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:

2237861

Date Received:

11/05/2012

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: 17180
2. Name of Operator: CITATION OIL & GAS CORP
3. Address: 14077 CUTTEN RD
City: HOUSTON State: TX Zip: 77269
4. Contact Name: SARAH KING
Phone: (281) 891-1585
Fax: (281) 580-2168

5. API Number 05-017-06908-00
6. County: CHEYENNE
7. Well Name: ARAPAHOE UNIT
Well Number: 156 (31-21)
8. Location: QtrQtr: NWNE Section: 21 Township: 14S Range: 42W Meridian: 6
9. Field Name: ARAPAHOE Field Code: 2875

Completed Interval

FORMATION: MORROW Status: PRODUCING Treatment Type:
Treatment Date: 09/04/2012 End Date: 09/06/2012 Date of First Production this formation: 09/07/2012
Perforations Top: 5194 Bottom: 5220 No. Holes: 104 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

MIRU 9/4/12. PERFORATED MORROW 5194-5220 4JSPF, 4" EXPANDABLE GUN, 36 GRAM CHARGE, 90 DEGREE SPACE, 52 ENTRY. TOOH, FL-4500' PU. TIHD W/DSV ASSEMBLY, 4 JTS, TAC, 164 JTS, 6' SUB. STRIPPED OF BOP, SET TAC W/25K, LAND TUBING, PACK OFF WELLHEAD. BHP-82.9 PSIA@ 151 DEGREES F. SEATED AND SPACED PUMP. RTP 9/6/12.

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: 09/07/2012 Hours: 3 Bbl oil: 273 Mcf Gas: 1 Bbl H2O: 24
Calculated 24 hour rate: Bbl oil: 3 Mcf Gas: 273 Bbl H2O: 1 GOR:
Test Method: PUMPING Casing PSI: 30 Tubing PSI: 30 Choke Size:
Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0
Tubing Size: 2 + 7/8 Tubing Setting Depth: 5243 Tbg setting date: 09/05/2012 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:

BTU GAS IS REQUIRED "0" IF MCF GAS IS ENTERED; API GRAVITY OIL IS REQUIRED "0" IF BBLS OIL IS ENTERED

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: SARAH KING

Title: PERMIT ANALYST Date: 11/1/2012 Email SKING@COGC.COM
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Attachment Check List

Att Doc Num	Name
2237861	FORM 5A SUBMITTED
2237862	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)