

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: 8960
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY
3. Address: 410 17TH STREET SUITE #1400 City: DENVER State: CO Zip: 80202
4. Contact Name: RUSSELL SCHUCKER Phone: (720) 440-6100 Fax: (720) 279-2331

5. API Number 05-123-34909-00
6. County: WELD
7. Well Name: Antelope Well Number: F-20
8. Location: QtrQtr: NWNW Section: 20 Township: 5N Range: 62W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/27/2012 End Date: 04/27/2012 Date of First Production this formation: 05/02/2012

Perforations Top: 6586 Bottom: 6596 No. Holes: 40 Hole size: 4/10

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

CODELL PHASER FRAC PUMPED A TOTAL OF 32,508 GAL OF PAD FLUID, PUMPED 99,708 GAL OF SLF WITH 247,860# OF 20/40 SAND. (1-4PPG). FINAL ISDP 3055 PSI. AVG PRESSURE 3442 PSI, AND AVERAGE RATE 22.2 BPM.

This formation is commingled with another formation: [X] 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: SOLD Gas Type: WET Btu Gas: API Gravity Oil:

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6544 Tbg setting date: 05/17/2012 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: FRACTURE STIMULATION

Treatment Date: 04/27/2012 End Date: 04/27/2012 Date of First Production this formation: 05/02/2012
Perforations Top: 6334 Bottom: 6596 No. Holes: 88 Hole size: 4/10

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

CODELL PHASER FRAC PUMPED A TOTAL OF 32,508 GAL OF PAD FLUID, PUMPED 99,708 GAL OF SLF WITH 247,860# OF 20/40 SAND. (1-4PPG). FINAL ISDP 3055 PSI. AVG PRESSURE 3442 PSI, AND AVERAGE RATE 22.2 BPM. NIOBRARA PHASER FRAC PUMPED A TOTAL OF 19,448 GAL OF PAD FLUID, PUMPED 116,046 GAL OF SLF WITH 260,000# OF 30/50 SAND, (1-4PPG). FINAL ISDP 2657 PSI, AVG PRESSURE 3534 PSI, AND AVG RATE 49.9 BPM.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 6375 Max pressure during treatment (psi): 4432
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 1.00
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.90
Total acid used in treatment (bbl): 24 Number of staged intervals: 2
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 2564
Fresh water used in treatment (bbl): 6291 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 505400 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/30/2012 Hours: 24 Bbl oil: 59 Mcf Gas: 73 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 59 Mcf Gas: 73 Bbl H2O: 0 GOR: 1237
Test Method: flowing Casing PSI: 1268 Tubing PSI: 494 Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1315 API Gravity Oil: 44
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6544 Tbg setting date: 05/17/2012 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: 04/27/2012 End Date: 04/27/2012 Date of First Production this formation: 05/02/2012
Perforations Top: 6334 Bottom: 6486 No. Holes: 48 Hole size: 4/10

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

NIOBRARA PHASER FRAC PUMPED A TOTAL OF 19,488 GAL OF PAD FLUID, PUMPED 116,046 GAL OF SLF WITH 260,000# OF 30/50 SAND. (1-4PPG). FINAL ISDP 2657 PSI. AVG PRESSURE 3534 PSI, AND AVERAGE RATE 49.9 BPM.

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: SOLD Gas Type: WET Btu Gas: _____ API Gravity Oil: _____
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6544 Tbg setting date: 05/17/2012 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: ROBERT TUCKER
Title: ENGINEERING TECH Date: 9/29/2012 Email: RTUCKER@BONANZACRK.COM

Attachment Check List

Att Doc Num	Name
2237803	FORM 5A SUBMITTED
2237804	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)