

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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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: 10340
2. Name of Operator: SUNDANCE ENERGY INC
3. Address: 633 17TH STREET #1950
City: DENVER State: CO Zip: 80202
4. Contact Name: Dean Rogers
Phone: (303) 543-5700
Fax: (303) 543-5701

5. API Number 05-123-36128-00
6. County: WELD
7. Well Name: HFE
Well Number: 34-22
8. Location: QtrQtr: SWSE Section: 22 Township: 4N Range: 68W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/05/2012 End Date: 12/05/2012 Date of First Production this formation: 01/29/2013
Perforations Top: 7285 Bottom: 7305 No. Holes: 80 Hole size: 0.38

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

Frac with 213,178 gal and 155,560# of sand

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

Total fluid used in treatment (bbl): 5076 Max pressure during treatment (psi): 5455
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.00
Type of gas used in treatment: Min frac gradient (psi/ft):
Total acid used in treatment (bbl): 0 Number of staged intervals: 1
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 2297
Fresh water used in treatment (bbl): 5076 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 155560 Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/30/2012 Hours: 24 Bbl oil: 94 Mcf Gas: 17 Bbl H2O: 38
Calculated 24 hour rate: Bbl oil: 94 Mcf Gas: 17 Bbl H2O: 38 GOR: 181
Test Method: Flow Casing PSI: 1400 Tubing PSI: Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1240 API Gravity Oil: 43
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: Dean Rogers

Title: Operation Engineer Date: \_\_\_\_\_ Email: drogers@sundanceenergy.net  
:

**Attachment Check List**

Att Doc Num	Name
400374268	WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)