

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400373925

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 05-123-36129-00 6. County: WELD 7. Well Name: HFE 8. Location: QtrQtr: SWSE Section: 22 Township: 4N Range: 68W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/11/2012 End Date: 12/11/2012 Date of First Production this formation: 01/14/2013

Perforations Top: 7538 Bottom: 7556 No. Holes: 72 Hole size: 0.38

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

Frac with 207,018 gal and 150,620# of sand

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

Total fluid used in treatment (bbl): 4929 Max pressure during treatment (psi): 4592 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): 1981 Fresh water used in treatment (bbl): 4929 Disposition method for flowback: DISPOSAL Total proppant used (lbs): 150620 Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/21/2013 Hours: 24 Bbl oil: 25 Mcf Gas: 18 Bbl H2O: 12 Calculated 24 hour rate: Bbl oil: 25 Mcf Gas: 18 Bbl H2O: 12 GOR: 720 Test Method: Flow Casing PSI: 1200 Tubing PSI: Choke Size: 18/64 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1240 API Gravity Oil: 46 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: Operations Engineer Date: \_\_\_\_\_ Email: drogers@sundanceenergy.net  
:

**Attachment Check List**

| Att Doc Num | Name               |
|-------------|--------------------|
| 400373927   | NET PRESSURE CHART |
| 400373928   | OTHER              |
| 400374285   | WELLBORE DIAGRAM   |

Total Attach: 3 Files

**General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b> | <b><u>Comment Date</u></b> |
|--------------------------|-----------------------|----------------------------|
|                          |                       |                            |

Total: 0 comment(s)