

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: 96155 4. Contact Name: Pauleen Tobin
2. Name of Operator: WHITING OIL AND GAS CORPORATION Phone: (303) 837-1661
3. Address: 1700 BROADWAY STE 2300 City: DENVER State: CO Zip: 80290 Fax: (303) 390-4923

5. API Number 05-123-35958-00 6. County: WELD
7. Well Name: Wildhorse Well Number: 02-0214AH
8. Location: QtrQtr: LOT 4 Section: 2 Township: 9N Range: 59W Meridian: 6
9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/27/2012 End Date: 10/28/2012 Date of First Production this formation: 11/04/2012

Perforations Top: 6607 Bottom: 10174 No. Holes: Hole size:

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

18 stage pHaserfrac system: 355460# 40/70 Ottawa sand, 1448900# 20/40 Ottawa sand, 360180# 20/40 CRC, 51357 bbls slickwater

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

Total fluid used in treatment (bbl): 51357 Max pressure during treatment (psi): 6158
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 27.00
Type of gas used in treatment: Min frac gradient (psi/ft):
Total acid used in treatment (bbl): 0 Number of staged intervals: 18
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 18757
Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 2164540 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: 11/04/2012 Hours: 24 Bbl oil: 179 Mcf Gas: 103 Bbl H2O: 180
Calculated 24 hour rate: Bbl oil: 179 Mcf Gas: 103 Bbl H2O: 180 GOR: 575
Test Method: separator Casing PSI: 50 Tubing PSI: 2700 Choke Size: 64/64
Gas Disposition: FLARED Gas Type: DRY Btu Gas: 2497 API Gravity Oil: 35
Tubing Size: 2 + 7/8 Tubing Setting Depth: 5021 Tbg setting date: 03/07/2013 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:

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

Signed: _____ Print Name: Pauleen Tobin
Title: Engineer Tech Date: 3/20/2013 Email pollyt@whiting.com
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Attachment Check List

Att Doc Num	Name
400393405	FORM 5A SUBMITTED
400393411	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)