

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:

400417890

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: 10254

4. Contact Name: Rich Larson

2. Name of Operator: RED MESA HOLDINGS/O&G LLC

Phone: (970) 588-3302

3. Address: 5619 DTC PARKWAY - STE 800

Fax: (970) 588-3562

City: GREENWOOD State: CO Zip: 80111

5. API Number 05-067-09864-00

6. County: LA PLATA

7. Well Name: GREER

Well Number: 34-3

8. Location: QtrQtr: NWSW

Section: 34

Township: 33N

Range: 12W

Meridian: N

9. Field Name: RED MESA

Field Code: 72890

Completed Interval

FORMATION: DAKOTA

Status: ABANDONED WELLBORE/COMPLETION

Treatment Type: ACID JOB

Treatment Date: 04/12/2013

End Date: 04/12/2013

Date of First Production this formation: 04/17/2013

Perforations Top: 3475

Bottom: 3508

No. Holes: 18

Hole size: 05/16

Provide a brief summary of the formation treatment:

Open Hole: ☐

Acid line pumped 5 Bbls 7.5% HCL, displaced w/10 Bbls 2% KCL. Perf @ 3475-3481; 3492-3500; 3503-3507 all shots went. RIH w/packer set @ 3412'. Swab 5 Bbls of fluid, tbg dry. NU Acid lines, test @ 2200 PSI. Pumped 28 Bbls St. Acid @ 131 PSI @ 2.7 BPM. Pumped 28 Bbls St. Acid @ 147 PSI @ 2.0 BPM and 45 Bio-balls. Pumped 24 Bbls St. Acid @ 360 PSI @ 2.0 BPM. Pumped 13 Bbls 2% KCL @ 399 PSI @ 2.0 BPM. ISIP 438, 5mins @ 117, 10mins @ 116, 15mins @ 116 (Final 116 in 15 mins) Treating PSI - Min 435, Max 1600, Avg 349 w/Operators Max Pressure @ 1500

This formation is commingled with another formation:

☐ Yes ☒ No

Total fluid used in treatment (bbl): 111

Max pressure during treatment (psi): 1600

Total gas used in treatment (mcf): 0

Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.45

Total acid used in treatment (bbl): 85

Number of staged intervals: 1

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 24

Fresh water used in treatment (bbl): 23

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 0

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/17/2013

Hours: 24

Bbl oil: 0

Mcf Gas: 0

Bbl H2O: 0

Calculated 24 hour rate:

Bbl oil: 0

Mcf Gas: 0

Bbl H2O: 0

GOR: 0

Test Method: Gauge

Casing PSI: 0

Tubing PSI: 70

Choke Size: 0

Gas Disposition:

Gas Type:

Btu Gas: 0

API Gravity Oil: 0

Tubing Size: 2 + 3/8

Tubing Setting Depth: 3504

Tbg setting date: 05/12/2013

Packer Depth: 3412

Reason for Non-Production:

Temporary production equipment set to test well for 30-45 days before committing to final completion installation.
Currently recovering treatment fluid with cut of oil. Will continue to produce for next 30-45 days.

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: Donna Pitre

Title: Office Manager

Date:

Email: dpitre@madisoncap.com

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Attachment Check List

Att Doc Num	Name
400417955	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)