

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 03/18/2013 End Date: 03/25/2013 Date of First Production this formation: 03/21/2013
Perforations Top: 6825 Bottom: 8530 No. Holes: 127 Hole size: 35/100

Provide a brief summary of the formation treatment: Open Hole:
3035 Gals 7 1/2% HCL; 659600 # 30/50 Sand; 160600 100/Mesh; 23050 Bbls Slickwater (Summary)

This formation is commingled with another formation: Yes No
Total fluid used in treatment (bbl): 23122 Max pressure during treatment (psi): 6274
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.43
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.80
Total acid used in treatment (bbl): 72 Number of staged intervals: 6
Recycled water used in treatment (bbl): 23050 Flowback volume recovered (bbl): 12020
Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE
Total proppant used (lbs): 820200 Rule 805 green completion techniques were utilized:
Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/18/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 927 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 927 Bbl H2O: 0 GOR: 0
Test Method: Flowing Casing PSI: 2222 Tubing PSI: 1909 Choke Size: 10/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1101 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8339 Tbg setting date: 04/01/2013 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:
• All flowback water entries are total estimates based on commingled volumes.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: _____ Print Name: Sandra Salazar
Title: Permit Technician II Date: _____ Email: sandra.salazar@wpenergy.com

Attachment Check List

Att Doc Num	Name
400420987	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)