

**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:
400351328

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: 10131
2. Name of Operator: ST. JAMES ENERGY OPERATING INC
3. Address: 11177 EAGLE VIEW DR STE 1
City: SANDY State: UT Zip: 84092
4. Contact Name: Kent Moore
Phone: (970) 301-0291
Fax: (970) 378-8623

5. API Number 05-123-34146-00
6. County: WELD
7. Well Name: Larson Farms
Well Number: 6-24
8. Location: QtrQtr: NESW Section: 24 Township: 6N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/09/2012 End Date: 04/10/2012 Date of First Production this formation: 04/13/2012
Perforations Top: 7400 Bottom: 7412 No. Holes: 48 Hole size: 13/32

Provide a brief summary of the formation treatment: _____ Open Hole:

Codell perforated using 3-1/8" slick gun with 19 gram 311L charges with a 0.41 inch entry hole, 21.12 inch of penetration and 60 degree phasing.
133,728 gallons of water used and 270,680 lbs of sand.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 133728 Max pressure during treatment (psi): 4100

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): 133728 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 270680 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

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.

FORMATION: NIORARA-CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: _____ End Date: _____ Date of First Production this formation: _____

Perforations Top: 7110 Bottom: 7412 No. Holes: 144 Hole size: 13/32

Provide a brief summary of the formation treatment: _____ Open Hole:

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____

Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/14/2012 Hours: 24 Bbl oil: 100 Mcf Gas: 168 Bbl H2O: 132

Calculated 24 hour rate: Bbl oil: 100 Mcf Gas: 168 Bbl H2O: 132 GOR: 1680

Test Method: Flowing Casing PSI: 540 Tubing PSI: _____ Choke Size: 14/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1261 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.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/10/2012 End Date: 04/10/2012 Date of First Production this formation: 04/13/2012
Perforations Top: 7110 Bottom: 7234 No. Holes: 96 Hole size: 13/32

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

Set cast iron flow through plug at 7340', 106' below bottom of Niobrara and 60' above Codell. Perforated Niobrara Bench B from 7218' to 7234' with 4 shots per foot for 16' for a total of 64. Perforated Niobrara A bench from 7110 to 7118 with 4 shots per foot for 8' for a total of 32. 96 holes in total. Holes were "salt and pepper" using a 3-1/8" slick gun. 2 shots per foot were 20 gram big hole charges with a 0.73" entry hole and 6.73" of penetration and 120 degree phasing and 2 shots per foot were 19 gram deep hole charges with a 0.41" entry hole and 21.12" of penetration with 120 degree phasing for a total of 60 degree phasing.
with entry hole sizes of 0.73' and 0.41'.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 174006 Max pressure during treatment (psi): 3371

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): 174006 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 250220 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

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:

In addition to Kent Moore, please contact Erin Mathews with Lamp Rynearson & Associates with any questions. Phone (970) 226-0342, erin.mathews@LRA-inc.com.

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

Signed: _____ Print Name: Erin Mathews

Title: Project Engineer Date: _____ Email erin.mathews@LRA-inc.com

Attachment Check List

| Att Doc Num | Name |
|-------------|--------------------|
| 400424504 | OPERATIONS SUMMARY |

Total Attach: 1 Files

General Comments

| User Group | Comment | Comment Date |
|-------------------|----------------|---------------------|
| | | |

Total: 0 comment(s)