

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:

400435770

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: 10051

2. Name of Operator: APOLLO OPERATING LLC

3. Address: 1538 WAZEE ST STE 200

City: DENVER State: CO Zip: 80202

4. Contact Name: TANYA CARPIO

Phone: (303) 830-0888 X.201

Fax: (303) 830-2818

5. API Number 05-123-35825-00

7. Well Name: JWHS

8. Location: QtrQtr: SENW Section: 2 Township: 3N Range: 68W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 32-2D

Completed Interval

|                                   |                  |                             |                      |  |  |
|-----------------------------------|------------------|-----------------------------|----------------------|--|--|
| FORMATION: <u>CODELL</u>          |                  | Status: <u>COMMINGLED</u>   |                      | Treatment Type: <u>FRACTURE STIMULATION</u>                |  |
| Treatment Date: <u>05/23/2013</u> |                  | End Date: <u>05/23/2013</u> |                      | Date of First Production this formation: <u>06/26/2013</u> |  |
| Perforations                      | Top: <u>7460</u> | Bottom: <u>7478</u>         | No. Holes: <u>72</u> | Hole size: <u>38/100</u>                                   |  |

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☐

CODELL SHOT FROM 7460'-7478' W/4 SPF AND 120 DEGREE PHASING. CODELL FRAC'D WITH 5209 BBLS FR WATER TREATMENT & 90160 LBS OF 30/50 PROPPANT. FORMATION BREAK @ 2714 PSI & 2.8 BPM, TREATED @ 4651 PSI AVERAGE PRESSURE, 60.0 BPM AVERAGE RATE.

|  |  |
|--|--|
| This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Total fluid used in treatment (bbl): <u>5209</u>   | Max pressure during treatment (psi): <u>5650</u>                             |
| Total gas used in treatment (mcf): _____   | Fluid density at initial fracture (lbs/gal): <u>8.40</u>                     |
| Type of gas used in treatment: _____   | Min frac gradient (psi/ft): <u>0.81</u>                                      |
| Total acid used in treatment (bbl): _____  | Number of staged intervals: <u>1</u>   |
| Recycled water used in treatment (bbl): _____  | Flowback volume recovered (bbl): <u>820</u>                                  |
| Fresh water used in treatment (bbl): <u>5209</u>   | Disposition method for flowback: <u>DISPOSAL</u>                             |
| Total proppant used (lbs): <u>90160</u>  | Rule 805 green completion techniques were utilized: <input type="checkbox"/> |
| Reason why green completion not utilized: <u>PIPELINE</u>  |  |

**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: <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, number of sacks cmt _____ |
|---------------------------------|---|-----------------------------------|

\*\* Bridge Plug Depth: \_\_\_\_\_     
 \*\* Sacks cement on top: \_\_\_\_\_     
 \*\* Wireline and Cement Job Summary must be attached.

|  |   |  |  |   |  |
|--|---|--|--|---|--|
| FORMATION: NIOBRARA-CODELL                                     |   | Status: PRODUCING                                    |  | Treatment Type: _____                               |  |
| Treatment Date: _____  |   | End Date: _____                                      |  | Date of First Production this formation: 06/26/2013 |  |
| Perforations   | Top: 7182   | Bottom: 7478   | No. Holes: 288   | Hole size: 38/100                                   |  |
| Provide a brief summary of the formation treatment:            |   |  | Open Hole: <input type="checkbox"/>  |   |  |
| This formation is commingled with another formation:           |   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/> |   |  |
| Reason why green completion not utilized: _____                |   |  |  |   |  |
| <b>Fracture stimulations must be reported on FracFocus.org</b> |   |  |  |   |  |
| <b><u>Test Information:</u></b>                                |   |  |  |   |  |
| Date: 06/26/2013   | Hours: 24   | Bbl oil: 98  | Mcf Gas: 144   | Bbl H2O: 149  |  |
| Calculated 24 hour rate:                                       | Bbl oil: 98   | Mcf Gas: 144   | Bbl H2O: 149   | GOR: 1465   |  |
| Test Method: FLOWING   | Casing PSI: 1725  | Tubing PSI: _____                                    | Choke Size: 12/64  |   |  |
| Gas Disposition: SOLD  | Gas Type: WET   | Btu Gas: 1250  | API Gravity Oil: 45  |   |  |
| Tubing Size: _____   | Tubing Setting Depth: _____                                       | Tbg setting date: _____                              | Packer Depth: _____  |   |  |
| Reason for Non-Production: TUBING NOT RUN YET.                 |   |  |  |   |  |
| Date formation Abandoned: _____                                | Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> 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: 05/29/2013 End Date: 05/29/2013 Date of First Production this formation: 06/26/2013  
Perforations Top: 7182 Bottom: 7336 No. Holes: 216 Hole size: 38/100  
Provide a brief summary of the formation treatment: Open Hole: ☐

NIOBRARA C SHOT FROM 7316-7336, NIOBRARA B SHOT FROM 7252-7268 & NIOBRARA A SHOT FROM 7182-7200 ALL W/4 SPF AND 120 DEGREE PHASING. NIOBRARA FRAC'D WITH 5255 BBLS FR WATER TREATMENT & 89660 LBS OF 30/50 PROPPANT. FORMATION BREAK @ 2598 PSI & 6.8 BPM, TREATED @ 4086 PSI AVERAGE PRESSURE, 59.6 BPM AVERAGE RATE.

This formation is commingled with another formation: ☐ Yes ☒ No  
Total fluid used in treatment (bbl): 5255 Max pressure during treatment (psi): 5643  
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.40  
Type of gas used in treatment: Min frac gradient (psi/ft): 0.83  
Total acid used in treatment (bbl): 23 Number of staged intervals: 1  
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 1216  
Fresh water used in treatment (bbl): 5231 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 89660 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: 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:

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

Signed: Print Name: TANYA CARPIO  
Title: OFFICE MANAGER Date: Email: TCARPIO@APOLLOOPERATING.COM

**Attachment Check List**

| Att Doc Num | Name             |
|-------------|------------------|
| 400435792   | WELLBORE DIAGRAM |

Total Attach: 1 Files

**General Comments**

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

Total: 0 comment(s)