

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:

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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: 10399
2. Name of Operator: NIGHTHAWK PRODUCTION LLC
3. Address: 1805 SHEA CENTER DR #290
City: HIGHLANDS State: CO Zip: 80129
4. Contact Name: Mindy Obando
Phone: (303) 407-9605
Fax: (303) 407-8790

5. API Number 05-073-06404-00
6. County: LINCOLN
7. Well Name: CRAIG
Well Number: 6-4
8. Location: QtrQtr: SENW Section: 4 Township: 14S Range: 55W Meridian: 6
9. Field Name: BOLERO Field Code: 7153

Completed Interval

FORMATION: ATOKA Status: TEMPORARILY ABANDONED Treatment Type:
Treatment Date: End Date: Date of First Production this formation:
Perforations Top: 6957 Bottom: 7044 No. Holes: 261 Hole size: 42/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

No treatment completed on this formation

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: 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: All water, no oil.

Date formation Abandoned: 08/12/2013 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

** Bridge Plug Depth: 6900 ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

FORMATION: <u>CHEROKEE</u>		Status: <u>SHUT IN</u>		Treatment Type: <u>ACID JOB</u>	
Treatment Date: <u>08/13/2013</u>		End Date: <u>08/13/2013</u>		Date of First Production this formation: _____	
Perforations	Top: <u>6593</u>	Bottom: <u>6603</u>	No. Holes: <u>0</u>	Hole size: _____	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
Acidize with 1000 gals 15% HCL Reaxe Acid					
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total fluid used in treatment (bbl): <u>84</u>		Max pressure during treatment (psi): <u>680</u>			
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): <u>24</u>		Number of staged intervals: _____			
Recycled water used in treatment (bbl): <u>60</u>		Flowback volume recovered (bbl): <u>57</u>			
Fresh water used in treatment (bbl): _____		Disposition method for flowback: <u>RECYCLE</u>			
Total proppant used (lbs): _____		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					
<u>Test Information:</u>					
Date: <u>08/14/2013</u>	Hours: <u>24</u>	Bbl oil: <u>0</u>	Mcf Gas: <u>0</u>	Bbl H2O: <u>57</u>	
Calculated 24 hour rate:	Bbl oil: <u>0</u>	Mcf Gas: <u>0</u>	Bbl H2O: <u>57</u>	GOR: _____	
Test Method: <u>Pumping</u>	Casing PSI: _____	Tubing PSI: _____	Choke Size: _____		
Gas Disposition: _____	Gas Type: _____	Btu Gas: <u>0</u>	API Gravity Oil: <u>0</u>		
Tubing Size: <u>2 + 7/8</u>	Tubing Setting Depth: <u>6525</u>	Tbg setting date: <u>08/13/2013</u>	Packer Depth: <u>6525</u>		
Reason for Non-Production: All water, no oil.					
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: MARMATON Status: SHUT IN Treatment Type: ACID JOB
Treatment Date: 08/15/2013 End Date: 08/16/2013 Date of First Production this formation: _____
Perforations Top: 6454 Bottom: 6456 No. Holes: 8 Hole size: 52/100
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Acidize with 300 gals 15% HCL on 8/15/13
Acidize with 1000 gals 15% HCL on 8/16/13

This formation is commingled with another formation: ☒ Yes ☐ No
Total fluid used in treatment (bbl): 201 Max pressure during treatment (psi): 110
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): 38 Number of staged intervals: _____
Recycled water used in treatment (bbl): 163 Flowback volume recovered (bbl): 201
Fresh water used in treatment (bbl): _____ Disposition method for flowback: RECYCLE
Total proppant used (lbs): _____ 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: 08/16/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 109
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 109 GOR: _____
Test Method: Pumping Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
Gas Disposition: _____ Gas Type: _____ Btu Gas: 0 API Gravity Oil: 0
Tubing Size: 2 + 7/8 Tubing Setting Depth: 6415 Tbg setting date: 08/15/2013 Packer Depth: 6415

Reason for Non-Production: All water, no oil.

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:

The perms listed for the Atoka formation were completed by RFP in July 2010. I have just relisted as we set a CIBP above these perms to TA the Atoka.

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

Signed: _____ Print Name: Mindy Obando
Title: Accounting Manager Date: _____ Email: mindyjoobando@nighthawkenenergy.com

Attachment Check List

Att Doc Num **Name**

400485559	WELLBORE DIAGRAM
400485561	WIRELINE JOB SUMMARY

Total Attach: 2 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)