

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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Date Received:

08/24/2012

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: 200149

2. Name of Operator: ATLAS RESOURCES LLC DBA ATLAS ROCKIES

3. Address: 3500 MASSILLON ROAD #100

City: UNIONTOWN

State: OH

Zip: 44685

4. Contact Name: MADELEINE LARIVIERE

Phone: (303) 308-1330

Fax: (303) 308-1590

5. API Number 05-095-06348-00

7. Well Name: STOUT

8. Location: QtrQtr: SESW

Section: 25

Township: 8N

Range: 44W

Meridian: 6

9. Field Name: AMHERST

Field Code: 2480

6. County: PHILLIPS

Well Number: 844-25-24

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/05/2011 End Date: Date of First Production this formation: 01/25/2012

Perforations Top: 2394 Bottom: 2416 No. Holes: 132 Hole size: 42/100

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

"Safety meeting.
Breakdown @ 1161 psi.
Total 50,300# 16/30 Texas Gold.
Total 50,000# 12/20 Texas Gold.
60.17 Tons CO₂.
ISIP 953 psi, 5 min. 755 psi, 10 min. 667 psi, 15 min. 639 psi.
Max Rate 13.9 bpm, Avg Rate 7.5 bpm, Max Psi 3,136, Avg Psi 804.
566 bbls Wtr to recover."

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 566 Max pressure during treatment (psi): 1161

Total gas used in treatment (mcf): 1034 Fluid density at initial fracture (lbs/gal):

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

Total acid used in treatment (bbl): Number of staged intervals: 1

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

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

Total proppant used (lbs): 100300 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: 01/26/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 54 Bbl H₂O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 54 Bbl H₂O: 0 GOR: 0

Test Method: FLOW Casing PSI: 520 Tubing PSI: 0 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 966 API Gravity Oil: 0

Tubing Size: Tubing Setting Depth: 0 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: WILLIAM F HAYWORTH

Title: PRESIDENT Date: 8/10/2012 Email: BHAYWORTH@BLACKRAVENENERGY.COM

Attachment Check List

Att Doc Num	Name
2233599	FORM 5A SUBMITTED
2233600	OTHER

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)