

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



DE	ET	OE	ES
----	----	----	----

Document Number:

2233319

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 05-095-06394-00

7. Well Name: On The Brink

8. Location: QtrQtr: SWSW

Section: 3

Township: 8N

Range: 43W

Meridian: 6

9. Field Name: AMHERST

Field Code: 2480

6. County: PHILLIPS

Well Number: 843-3-14

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/15/2012 End Date: Date of First Production this formation:

Perforations Top: 2402 Bottom: 2418 No. Holes: 96 Hole size: 42/100

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

"SAFETY MEETING
50,020# 16/30 DANIELS
50,080# 12/20 TEXAS GOLD
60.11 CO2
BREAKDOWN =1129 PSI
ISIP = 815 PSI / 5 MIN = 732 PSI
10 MIN =709 PSI / 15 MIN = 696 PSI 553 BBLS"

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

Total fluid used in treatment (bbl): 553 Max pressure during treatment (psi): 1129
Total gas used in treatment (mcf): 1033 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): 100100 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: TEMPORARILY SHUT IN

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: 8/23/2012 Email: BHAYWORTH@BLACKRAVENENERGY.COM

Attachment Check List

Att Doc Num	Name
2233319	FORM 5A SUBMITTED
2233320	OTHER

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)