

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:

400498819

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: 10261 4. Contact Name: JONATHAN RUNGE
2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION Phone: (720) 420-5700
3. Address: 730 17TH ST STE 610 Fax: (720) 420-5800
City: DENVER State: CO Zip: 80202

5. API Number 05-123-37066-00 6. County: WELD
7. Well Name: Triangle Well Number: 4-22
8. Location: QtrQtr: SENW Section: 22 Township: 7N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/03/2013 End Date: 06/03/2013 Date of First Production this formation: 08/18/2013

Perforations Top: 7646 Bottom: 7660 No. Holes: 56 Hole size: 038/100

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

Frac on 6/3/13 w/ 291,553 gals FR and 204,660 lbs 30/50 White

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

Total fluid used in treatment (bbl): 6942 Max pressure during treatment (psi): 5719

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.86

Total acid used in treatment (bbl): 0 Number of staged intervals: 1

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 3376

Fresh water used in treatment (bbl): 6942 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 204660 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: 09/12/2013 Hours: 24 Bbl oil: 76 Mcf Gas: 24 Bbl H2O: 8

Calculated 24 hour rate: Bbl oil: 76 Mcf Gas: 24 Bbl H2O: 8 GOR: 316

Test Method: FLOWING Casing PSI: 800 Tubing PSI: _____ Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1269 API Gravity Oil: 41

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:

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

Signed: _____

Print Name: JONATHAN RUNGE

Title: CONSULTANT

Date: _____

Email jrunge@iptengineers.com

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Attachment Check List

Att Doc Num

Name

400498820

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)