

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:

400345889

Date Received:

09/06/2013

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: 10110

4. Contact Name: Shannon Hartnett

2. Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Phone: (303) 830-9893

3. Address: 1801 BROADWAY #500

Fax: (866) 522-1673

City: DENVER State: CO Zip: 80202

5. API Number 05-123-32772-00

6. County: WELD

7. Well Name: BINDER

Well Number: 24-20

8. Location: QtrQtr: NESW Section: 20 Township: 4N Range: 67W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: <u>CODELL</u>		Status: <u>COMMINGLED</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>02/26/2012</u>		End Date: <u>02/26/2012</u>		Date of First Production this formation: <u>04/18/2012</u>	
Perforations	Top: <u>7573</u>	Bottom: <u>7589</u>	No. Holes: <u>36</u>	Hole size: <u>7/20</u>	

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

Codell Frac Treatment
 Codell Treatment Totals: Cln Fluid: 4087.6 bbls, Sand Laden Fluid: 2604.5 bbls, Proppant: 115,040 lbs 30/50, ATP: 4604 psi, ATR: 60.6 bpm, MTP: 5606 psi, MTR: 60.8 bpm.

This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Total fluid used in treatment (bbl): <u>4088</u>	Max pressure during treatment (psi): <u>5606</u>
Total gas used in treatment (mcf): <u>0</u>	Fluid density at initial fracture (lbs/gal): <u>8.34</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.84</u>
Total acid used in treatment (bbl): <u>0</u>	Number of staged intervals: <u>1</u>
Recycled water used in treatment (bbl): <u>0</u>	Flowback volume recovered (bbl): <u>1254</u>
Fresh water used in treatment (bbl): <u>4088</u>	Disposition method for flowback: <u>DISPOSAL</u>
Total proppant used (lbs): <u>115040</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

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:

Date formation Abandoned: _____	Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____
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** Bridge Plug Depth: _____
 ** Sacks cement on top: _____
 ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: _____ End Date: _____ Date of First Production this formation: 04/18/2012

Perforations Top: 7061 Bottom: 7589 No. Holes: 55 Hole size: 7/20

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

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: 04/19/2012 Hours: 24 Bbl oil: 57 Mcf Gas: 206 Bbl H2O: 58

Calculated 24 hour rate: Bbl oil: 57 Mcf Gas: 206 Bbl H2O: 6 GOR: 3614

Test Method: Test Separator Casing PSI: 1900 Tubing PSI: 1800 Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1302 API Gravity Oil: 51

Tubing Size: 2 + 3/8 Tubing Setting Depth: 1800 Tbg setting date: 05/31/2012 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.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/04/2012 End Date: 03/04/2012 Date of First Production this formation: 04/18/2012

Perforations Top: 7061 Bottom: 7230 No. Holes: 19 Hole size: 7/20

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

Niobrara Frac Treatment
Niobrara Treatment Totals: CIn Fluid: 5820.7 bbls, Sand Laden Fluid: 4174.7 bbls, Proppant: 200,400 lbs 40/50, 4000 20/40 SLC ATP: 4354 psi, ATR: 59.8 bpm, MTP: 6361 psi, MTR: 61.4 bpm.

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

Total fluid used in treatment (bbl): 5946 Max pressure during treatment (psi): 5525

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): 0.87

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

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1254

Fresh water used in treatment (bbl): 5946 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 203140 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: _____

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: Shannon Hartnett

Title: Reg. Comp. Spec. Date: 9/6/2013 Email: regulatorypermitting@gwogco.com

Attachment Check List

Att Doc Num **Name**

400345889 FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Corrected GOR as per opr. Corrected tubing size & setting information and date as per opr.	10/22/2013 2:31:58 PM
Permit	Opr is submitting a new form 5 to correct the TOPs.	9/16/2013 2:26:23 PM
Permit	Top of NB (7061) is not in permitted formation. Opr notified and form on hold.	9/9/2013 12:03:12 PM

Total: 3 comment(s)