

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



Table with columns DE, ET, OE, ES

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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
2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION
3. Address: 730 17TH ST STE 610 City: DENVER State: CO Zip: 80202
4. Contact Name: JONATHAN RUNGE Phone: (303) 216-0703 Fax: (303) 216-2139

5. API Number 05-123-36335-00
6. County: WELD
7. Well Name: Kaiser Well Number: 921-10
8. Location: QtrQtr: SENW Section: 10 Township: 6N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: TEMPORARILY ABANDONED Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/08/2013 End Date: 01/08/2013 Date of First Production this formation:
Perforations Top: 7256 Bottom: 7273 No. Holes: 68 Hole size: 040/100

Provide a brief summary of the formation treatment: Open Hole: []

277,704 gals, plus 4746 gal preflush, 180,900 lbs 30/50 White

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 6725 Max pressure during treatment (psi): 5768
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 0.25
Type of gas used in treatment: Min frac gradient (psi/ft): 0.85
Total acid used in treatment (bbl): 0 Number of staged intervals: 1
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 5380
Fresh water used in treatment (bbl): 6612 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 180900 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: Operator currently testing upper zones

Date formation Abandoned: 01/19/2013 Squeeze: [] Yes [] No If yes, number of sacks cmt

** Bridge Plug Depth: 7220 ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/20/2013 End Date: 01/22/2013 Date of First Production this formation: 03/14/2013
Perforations Top: 6970 Bottom: 7180 No. Holes: 300 Hole size: 042/100

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

NBRR A- 152,761 gals, 55,300 lbs 30/50 White
NBRR B- 272,424 gals, 181,340 lbs 30/50 White
NBRR C- 192,506 gals, 100,580 lbs 30/50 White
plus 13818 gal preflush

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 15036 Max pressure during treatment (psi): 5896
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.58
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.91
Total acid used in treatment (bbl): 0 Number of staged intervals: 3
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 12029
Fresh water used in treatment (bbl): 14707 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 337220 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: 03/19/2013 Hours: 18 Bbl oil: 90 Mcf Gas: 112 Bbl H2O: 4
Calculated 24 hour rate: Bbl oil: 120 Mcf Gas: 149 Bbl H2O: 5 GOR: 1244
Test Method: FLOWING Casing PSI: 1060 Tubing PSI: _____ Choke Size: 012/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1284 API Gravity Oil: 47
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: JONATHAN RUNGE
Title: CONSULTANT Date: 6/25/2013 Email jrunge@iptengineers.com

Attachment Check List

Att Doc Num	Name
400431591	FORM 5A SUBMITTED
400431648	WELLBORE DIAGRAM
400438693	WIRELINER JOB SUMMARY

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Wireline Survey is fairly illegible, but bridge plug at 7220' can be read. Ready to pass.	10/25/2013 2:39:32 PM
Permit	Corrected fluid density to 8.58 #/gal per operator. Added detail to total fluid makeup per operator.	7/22/2013 8:18:58 AM

Total: 2 comment(s)