

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 10422 4. Contact Name: Jake Flora
2. Name of Operator: PRONGHORN OPERATING LLC Phone: (720) 988-5375
3. Address: 8400 E PRENTICE AVENUE #1000 Fax:
City: GREENWOOD State: CO Zip: 80111

5. API Number 05-017-07759-00 6. County: CHEYENNE
7. Well Name: Evan Well Number: 2
8. Location: QtrQtr: NWNE Section: 7 Township: 14S Range: 44W Meridian: 6
9. Field Name: SPUR Field Code: 78800

Completed Interval

FORMATION: OSAGE Status: DRY AND ABANDONED Treatment Type: ACID JOB

Treatment Date: 09/26/2013 End Date: Date of First Production this formation:

Perforations Top: 5460 Bottom: 5466 No. Holes: 24 Hole size: 01/2

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

Pumped 500 gal 15% HCL.

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

Total fluid used in treatment (bbl): 42 Max pressure during treatment (psi): 500

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

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

Total acid used in treatment (bbl): 12 Number of staged intervals:

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 35

Fresh water used in treatment (bbl): 30 Disposition method for flowback: DISPOSAL

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: 09/26/2013 Hours: 3 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 36

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 60 GOR: 0

Test Method: swab Casing PSI: 0 Tubing PSI: 0 Choke Size:

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5475 Tbg setting date: 09/26/2013 Packer Depth: 5412

Reason for Non-Production: Wet

Date formation Abandoned: 09/27/2013 Squeeze: [ ] Yes [X] No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 5440 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

FORMATION: SPERGEN Status: PRODUCING Treatment Type: ACID JOB  
 Treatment Date: 09/28/2013 End Date: 09/28/2013 Date of First Production this formation: 10/13/2013  
 Perforations Top: 5387 Bottom: 5393 No. Holes: 24 Hole size: 01/2  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Pumped 500 gal 15% HCL

This formation is commingled with another formation:  Yes  No  
 Total fluid used in treatment (bbl): 43 Max pressure during treatment (psi): 400  
 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): \_\_\_\_\_  
 Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): \_\_\_\_\_  
 Total acid used in treatment (bbl): 12 Number of staged intervals: \_\_\_\_\_  
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 40  
 Fresh water used in treatment (bbl): 30 Disposition method for flowback: DISPOSAL  
 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: 10/13/2013 Hours: 24 Bbl oil: 33 Mcf Gas: 0 Bbl H2O: 0  
 Calculated 24 hour rate: Bbl oil: 33 Mcf Gas: 0 Bbl H2O: 0 GOR: 0  
 Test Method: pump Casing PSI: 0 Tubing PSI: 40 Choke Size: \_\_\_\_\_  
 Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ Btu Gas: 0 API Gravity Oil: 38  
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5400 Tbg setting date: 09/28/2013 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: Jake Flora  
 Title: Petroleum Engineer Date: \_\_\_\_\_ Email jakeflora@kfrcorp.com

**Attachment Check List**

Att Doc Num	Name
400515548	WIRELINE JOB SUMMARY

Total Attach: 1 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)