

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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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: 8960 4. Contact Name: Robert Tucker
 2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (720) 440-1600
 3. Address: 410 17TH STREET SUITE #1400 Fax: _____
 City: DENVER State: CO Zip: 80202

5. API Number 05-123-37404-00 6. County: WELD
 7. Well Name: State Antelope Well Number: 31-34-16HNB
 8. Location: QtrQtr: NWNE Section: 16 Township: 5N Range: 62W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/28/2013 End Date: 08/30/2013 Date of First Production this formation: 09/12/2013

Perforations Top: 6934 Bottom: 11087 No. Holes: _____ Hole size: _____

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

18 Stage Niobrara pumped a total of 57,364 bbls of fluid (Hybrid pHaser Frac) and 4,239,780# of sand (40/70 Ottawa, 30/50 Ottawa, 20/40 SB Excel), ATP 3798 psi, ATR 50.9 bpm, Final ISDP 3112 psi, completed with sliding sleeves and casing packers.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 57364 Max pressure during treatment (psi): 3985
 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.92
 Total acid used in treatment (bbl): 0 Number of staged intervals: 18
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 25305
 Fresh water used in treatment (bbl): 57364 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 4239780 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: 72 Bbl oil: 1122 Mcf Gas: 1074 Bbl H2O: 1062
 Calculated 24 hour rate: Bbl oil: 374 Mcf Gas: 358 Bbl H2O: 354 GOR: 957
 Test Method: Flowing Casing PSI: 0 Tubing PSI: 0 Choke Size: _____
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1311 API Gravity Oil: 43
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 6544 Tbg setting date: 09/07/2013 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:

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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: Robert Tucker
Title: Engineering Tech Date: _____ Email rtucker@bonanzacrk.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400516219	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)