

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:

400498504

Date Received:

10/20/2013

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: 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: (720) 420-5700
Fax: (720) 420-5800
Email: jrunge@iptengineers.com

5. API Number 05-123-37204-00
6. County: WELD
7. Well Name: Triangle
Well Number: 32-22
8. Location: QtrQtr: SENW Section: 22 Township: 7N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

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

Treatment Date: 06/06/2013 End Date: 05/21/2013 Date of First Production this formation:

Perforations Top: 7710 Bottom: 7723 No. Holes: 52 Hole size: 038/100

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

Frac omn 5/30/13 w/ 279,321 gals FR & 185,900 lbs 30/50 White

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

Total fluid used in treatment (bbl): 6651 Max pressure during treatment (psi): 5811

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): 0.83

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

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 2261

Fresh water used in treatment (bbl): 6651 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 185900 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: Testing upper zone

Date formation Abandoned: 06/06/2013 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

** Bridge Plug Depth: 7670 ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/07/2013 End Date: 06/07/2013 Date of First Production this formation: 08/18/2013

Perforations Top: 7410 Bottom: 7634 No. Holes: 284 Hole size: 042/100

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

Frac Nio C w/ 155,405 gals FR & 85100 lbs 30/50 White
 Frac Nio B w/ 301,555 gals FR & 205,504 lbs 30/50 White
 Frac Nio A w/ 161,396 gals FR & 98,909 lbs 30/50 White

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

Total fluid used in treatment (bbl): 14770 Max pressure during treatment (psi): 5698

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): 0.89

Total acid used in treatment (bbl): 47 Number of staged intervals: 3

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 6782

Fresh water used in treatment (bbl): 14723 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 389513 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: 09/11/2013 Hours: 24 Bbl oil: 118 Mcf Gas: 48 Bbl H2O: 17

Calculated 24 hour rate: Bbl oil: 118 Mcf Gas: 48 Bbl H2O: 17 GOR: 407

Test Method: FLOWING Casing PSI: 925 Tubing PSI: _____ Choke Size: 012/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1284 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: _____

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: 10/20/2013 Email: jrunge@iptengineers.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
2114461	WIRELINE JOB SUMMARY
400498504	FORM 5A SUBMITTED
400498509	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Received wireline job summary. Ready to pass.	1/14/2014 8:28:18 AM
Permit	Requested wireline job summary.	11/13/2013 3:13:30 PM

Total: 2 comment(s)