

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:

400541169

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: 10399

2. Name of Operator: NIGHTHAWK PRODUCTION LLC

3. Address: 1805 SHEA CENTER DR #290

City: HIGHLANDS State: CO Zip: 80129

4. Contact Name: Joyce Henkin

Phone: (303) 407-9609

Fax: (303) 407-8790

Email: joycehenkin@nighthawkenenergy.com

5. API Number 05-073-06559-00

7. Well Name: BIG SKY

8. Location: QtrQtr: SESW Section: 11 Township: 6S Range: 54W Meridian: 6

9. Field Name: ARIKAREE CREEK Field Code: 2914

6. County: LINCOLN

Well Number: 14-11

Completed Interval

FORMATION: SPERGEN Status: WAITING ON COMPLETION Treatment Type: ACID JOB
Treatment Date: 12/16/2013 End Date: 12/20/2013 Date of First Production this formation: _____
Perforations Top: 8113 Bottom: 8134 No. Holes: 84 Hole size: 52/100
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Acidized with 125 bbls of produced water with BC-1 Asphaltine solvent @ 175 degrees F, 7 1/2% acetic acid with additives @ 140 degrees F followed by 75 bbls produced water @ 170 degrees (Perfs 8113 - 8134) 84 holes .

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

Total fluid used in treatment (bbl): 197 Max pressure during treatment (psi): 1800
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): 72 Number of staged intervals: _____
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): 0 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 0 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: 8076

Reason for Non-Production: No production - Squeezed perfs on 12/28/2013 with 50 sx, 11bbls, Class H cement - 25 sx w/6lbs fluid loss, 25 sx neat

Date formation Abandoned: _____ Squeeze: ☒ Yes ☐ No If yes, number of sacks cmt 50

** 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: Joyce Henkin
Title: Production Tech Date: _____ Email: joycehenkin@nighthawkenenergy.com

Attachment Check List

Att Doc Num	Name
400555387	OPERATIONS SUMMARY
400556633	CEMENT JOB SUMMARY

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)