

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



DE ET OE ES

Document Number:

400537147

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: 10150
2. Name of Operator: BLACK HILLS PLATEAU PRODUCTION LLC
3. Address: 1515 WYNKOOP ST STE 500
City: DENVER State: CO Zip: 80202
4. Contact Name: Jessica Donahue
Phone: (720) 210-1333
Fax: (303) 566-3344
Email: Jessica.Donahue@blackhillscorp.com

5. API Number 05-077-10200-00
6. County: MESA
7. Well Name: WhF
Well Number: DHS3C-19 D17998
8. Location: QtrQtr: NWNW Section: 17 Township: 9S Range: 98W Meridian: 6
9. Field Name: BRONCO FLATS Field Code: 7563

Completed Interval

FORMATION: MANCOS Status: PRODUCING Treatment Type: FRACTURE STIMULATION
Treatment Date: 11/25/2013 End Date: 12/05/2013 Date of First Production this formation: 12/10/2013
Perforations Top: Bottom: No. Holes: 2136 Hole size:
Provide a brief summary of the formation treatment: Open Hole: ☐
This formation is commingled with another formation: ☐ Yes ☒ No
Total fluid used in treatment (bbl): 477750 Max pressure during treatment (psi): 7430
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): 936 Number of staged intervals: 40
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 38166
Fresh water used in treatment (bbl): 477750 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 9563240 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:
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: Jessica Donahue

Title: Regulatory Technician

Date: _____

Email: Jessica.Donahue@blackhillscorp.com

:

Attachment Check List

Att Doc Num

Name

400558699

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|--|
| | | |
|--|--|--|

Total: 0 comment(s)