

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: 96155 4. Contact Name: Pauleen Tobin
 2. Name of Operator: WHITING OIL AND GAS CORPORATION Phone: (303) 837-1661
 3. Address: 1700 BROADWAY STE 2300 Fax: (303) 390-4923
 City: DENVER State: CO Zip: 80290 Email: pollyt@whiting.com

5. API Number 05-123-37708-00 6. County: WELD
 7. Well Name: Razor Well Number: 27K-3406B
 8. Location: QtrQtr: NESW Section: 27 Township: 10N Range: 58W Meridian: 6
 9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/11/2013 End Date: 10/22/2013 Date of First Production this formation: 12/17/2013

Perforations Top: 6323 Bottom: 12382 No. Holes: 1440 Hole size: 3/8

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

Cemented liner, plug and perf, 40 stage 25# pHawerFrac: 357897# 40/70 Premium White, 6,369,554# 20/40 Premium White, 586,603# CRC 20/40. 162,746 bbls slickwater

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 162746 Max pressure during treatment (psi): 8450
 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): 0.80
 Total acid used in treatment (bbl): 952 Number of staged intervals: 40
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 28691
 Fresh water used in treatment (bbl): 162746 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 7314053 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: 12/24/2013 Hours: 24 Bbl oil: 559 Mcf Gas: 279 Bbl H2O: 693
 Calculated 24 hour rate: Bbl oil: 559 Mcf Gas: 279 Bbl H2O: 693 GOR: 499
 Test Method: Separator Casing PSI: 200 Tubing PSI: 200 Choke Size: 30/64
 Gas Disposition: FLARED Gas Type: DRY Btu Gas: 1389 API Gravity Oil: 33
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 4796 Tbg setting date: 12/15/2013 Packer Depth: 4789

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: Pauleen Tobin
Title: Engineer Tech Date: _____ Email pollyt@whiting.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400561009	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)