

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 10422 2. Name of Operator: PRONGHORN OPERATING LLC 3. Address: 8400 E PRENTICE AVENUE #1000 City: GREENWOOD State: CO Zip: 80111 4. Contact Name: Jake Flora Phone: (720) 988-5375 Fax: Email: jakeflora@kfrcorp.com

5. API Number 05-017-06098-00 6. County: CHEYENNE 7. Well Name: State of Colorado Well Number: 2 8. Location: QtrQtr: SWSW Section: 16 Township: 13S Range: 44W Meridian: 6 9. Field Name: SMOKY CREEK Field Code: 77560

Completed Interval

FORMATION: SPERGEN Status: DRY AND ABANDONED Treatment Type: ACID JOB

Treatment Date: 11/07/2013 End Date: 11/07/2013 Date of First Production this formation:

Perforations Top: 5416 Bottom: 5422 No. Holes: 24 Hole size: 01/2

Provide a brief summary of the formation treatment: Open Hole: []

Pumped 500 gal 15% HCL.

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 45 Max pressure during treatment (psi): 200

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): 12 Number of staged intervals: 1

Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 50

Fresh water used in treatment (bbl): 33 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): Rule 805 green completion techniques were utilized: []

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/11/2013 Hours: 10 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 30

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 60 GOR:

Test Method: swab Casing PSI: 0 Tubing PSI: 0 Choke Size:

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5433 Tbg setting date: 11/07/2013 Packer Depth:

Reason for Non-Production: Swabbed dry

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:

Pronghorn Operating is in the processs of converting the well into an injector.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Jake Flora

Title: Petroleum Engineer Date: _____ Email jakeflora@kfrcorp.com
:

Attachment Check List

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