

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: 10433 4. Contact Name: mel lackie
 2. Name of Operator: PICEANCE ENERGY LLC Phone: (303) 339-4400
 3. Address: 1512 LARIMER STREET #1000 Fax: (303) 339-4399
 City: DENVER State: CO Zip: 80202 Email: mlackie@laramie-energy.com

5. API Number 05-045-16378-00 6. County: GARFIELD
 7. Well Name: JOHNSON Well Number: 5-06D
 8. Location: QtrQtr: NWNW Section: 5 Township: 8S Range: 93W Meridian: 6
 9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/26/2013 End Date: 09/12/2013 Date of First Production this formation: 10/10/2013

Perforations Top: 8197 Bottom: 10113 No. Holes: 228 Hole size: 0.35

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

Fracture stimulated with 86,199 bbbls slickwater; 1,087,230 # 20/40 white sand; 490,100 # 30/50 white sand in 8 stages

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 86199 Max pressure during treatment (psi): 7719
 Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 0.84
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.61
 Total acid used in treatment (bbl): 155 Number of staged intervals: 8
 Recycled water used in treatment (bbl): 86199 Flowback volume recovered (bbl): 38214
 Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE
 Total proppant used (lbs): 1577330 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/17/2013 Hours: 1 Bbl oil: 0 Mcf Gas: 47 Bbl H2O: 30
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1136 Bbl H2O: 720 GOR: 0
 Test Method: flowing Casing PSI: 2650 Tubing PSI: 1650 Choke Size: 20
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1100 API Gravity Oil: 0
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 9139 Tbg setting date: 10/10/2013 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:

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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: mel lackie

Title: engineering technician Date: _____ Email mlackie@laramie-energy.com
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Attachment Check List

Att Doc Num Name

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Total Attach: 0 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)