

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: 96340 2. Name of Operator: WIEPKING-FULLERTON ENERGY LLC 3. Address: 4600 S DOWNING ST City: ENGLEWOOD State: CO Zip: 80113 4. Contact Name: Jack Fincham Phone: (303) 906-3335 Fax: (303) 761-9067 Email: fincham4@msn.com

5. API Number 05-073-06622-00 6. County: LINCOLN 7. Well Name: Ma-State Well Number: # 12X 8. Location: QtrQtr: SWSE Section: 24 Township: 10S Range: 56W Meridian: 6 9. Field Name: GREAT PLAINS Field Code: 32756

Completed Interval

FORMATION: OSAGE Status: PRODUCING Treatment Type: Treatment Date: End Date: Date of First Production this formation: 08/02/2014 Perforations Top: 7900 Bottom: 7920 No. Holes: 80 Hole size: 1/4 Provide a brief summary of the formation treatment: Open Hole: []

No Treatment 7-22-2014 perf Osage formation 7900' - 7920' SWAB

This formation is commingled with another formation: [] Yes [X] No Total fluid used in treatment (bbl): Max pressure during treatment (psi): Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): Type of gas used in treatment: Min frac gradient (psi/ft): Total acid used in treatment (bbl): Number of staged intervals: Recycled water used in treatment (bbl): Flowback volume recovered (bbl): Fresh water used in treatment (bbl): Disposition method for flowback: 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: 07/22/2014 Hours: 8 Bbl oil: 115 Mcf Gas: 0 Bbl H2O: 0 Calculated 24 hour rate: Bbl oil: 345 Mcf Gas: 0 Bbl H2O: 0 GOR: Test Method: SWAB Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 38 Tubing Size: 2 + 7/8 Tubing Setting Depth: 7850 Tbg setting date: 07/22/2014 Packer Depth: 7850

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:

Ma-State 12X is producing oil well from Osage formation with perms @ 7900' -7920'

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

Signed: _____ Print Name: Jack Fincham

Title: Agent Date: 8/21/2014 Email fincham4@msn.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400666781	FORM 5A SUBMITTED
400666802	WELLBORE DIAGRAM
400666809	WIRELINE JOB SUMMARY

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)