

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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Document Number:

400616666

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.

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| 1. OGCC Operator Number: 96155 | 4. Contact Name: Elvera Berryman |
| 2. Name of Operator: WHITING OIL AND GAS CORPORATION | Phone: (303) 390-4221 |
| 3. Address: 1700 BROADWAY STE 2300 | Fax: (303) 390-1598 |
| City: DENVER State: CO Zip: 80290 | Email: elvera.berryman@whiting.com |

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| 5. API Number 05-123-38531-00 | 6. County: WELD |
| 7. Well Name: Razor | Well Number: 11E-0202B |
| 8. Location: QtrQtr: SWNW Section: 11 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: 05/23/2014 End Date: 05/28/2014 Date of First Production this formation: 07/03/2014

Perforations Top: 6425 Bottom: 12983 No. Holes: 1440 Hole size: 3/8

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

Cemented Liner 40 staged intervals:
Totals for 40 Staged Intervals: Total Proppant: 194920 # 40/70 White Sand; 4986520# 16/30 White Sand.
122813 bbl Total Slurry Vol; 117235 Total Clean Vol. 26005 bbl Total Slickwater Vol.; Total 948 bbl 15% HCl; 70325 bbl QuadraFrac
Crosslink Gel; 19957 bbl Linear Gel.
Fluid type: QuadraFrac Crosslink and Linear Gel. See attached wellbore diagram for details.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 117235 Max pressure during treatment (psi): 9044
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): 0.76
Total acid used in treatment (bbl): 948 Number of staged intervals: 40
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 60706
Fresh water used in treatment (bbl): 117235 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 5181440 Rule 805 green completion techniques were utilized: ☒
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 07/26/2014 Hours: 24 Bbl oil: 509 Mcf Gas: 82 Bbl H2O: 547
Calculated 24 hour rate: Bbl oil: 509 Mcf Gas: 82 Bbl H2O: 547 GOR: 161
Test Method: Separator Casing PSI: 900 Tubing PSI: 150 Choke Size: 32/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1385 API Gravity Oil: 33
Tubing Size: 2 + 7/8 Tubing Setting Depth: 6099 Tbg setting date: 06/17/2014 Packer Depth: 6099
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: Elvera Berryman
Title: Engineer Tech Date: Email: elvera.berryman@whiting.com

Attachment Check List

| Att Doc Num | Name |
|-------------|------------------|
| 400704320 | WELLBORE DIAGRAM |

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)