

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



Table with columns DE, ET, OE, ES

Document Number: 2430207

Date Received: 08/29/2013

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: 62340
2. Name of Operator: NATIONAL FUEL CORPORATION
3. Address: 8400 EAST PRENTICE AVE #735
City: GREENWOOD State: CO Zip: 80111-
4. Contact Name: ANDREW BUSCH
Phone: (303) 220-7772
Fax: (303) 220-7773
Email: ABUSCH@NATIONAL-FUEL.COM

5. API Number 05-045-06163-00
6. County: GARFIELD
7. Well Name: FERGUSON
Well Number: 3-9
8. Location: QtrQtr: NESW Section: 9 Township: 8S Range: 104W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: DAKOTA Status: PRODUCING Treatment Type:

Treatment Date: 05/22/2013 End Date: Date of First Production this formation: 06/06/2013

Perforations Top: 2816 Bottom: 2901 No. Holes: 46 Hole size: 38/100

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

CLEANED PERFS WITH 1100 GALLONS OF 7 1/2% HCl.

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

Total fluid used in treatment (bbl):
Total gas used in treatment (mcf):
Type of gas used in treatment:
Total acid used in treatment (bbl):
Recycled water used in treatment (bbl):
Fresh water used in treatment (bbl):
Total proppant used (lbs):
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal):
Min frac gradient (psi/ft):
Number of staged intervals:
Flowback volume recovered (bbl):
Disposition method for flowback:
Rule 805 green completion techniques were utilized: [ ]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/24/2013 Hours: 10 Bbl oil: Mcf Gas: 24 Bbl H2O:
Calculated 24 hour rate: Bbl oil: Mcf Gas: 58 Bbl H2O: GOR:
Test Method: production mete Casing PSI: Tubing PSI: 22 Choke Size:
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1060 API Gravity Oil:
Tubing Size: 2 + 3/8 Tubing Setting Depth: 2779 Tbg setting date: 05/21/2013 Packer Depth: 2779

Reason for Non-Production:

Date formation Abandoned: Squeeze: [ ] Yes [X] No If yes, number of sacks cmt

\*\* Bridge Plug Depth: \*\* Sacks cement on top: \*\* Wireline and Cement Job Summary must be attached.

FORMATION: ENTRADA Status: ABANDONED Treatment Type: WELLBORE/COMPLETION

Treatment Date: 05/16/2013 End Date: Date of First Production this formation: Perforations Top: 3556 Bottom: 3575 No. Holes: 19 Hole size: 38/100

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

CIBP SET AT 3490' WITH 4 SACKS OF CEMENT ON TOP.

This formation is commingled with another formation:  Yes  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: Hours: Bbl oil: Mcf Gas: Bbl H2O: Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR: Test Method: Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: API Gravity Oil: Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production: NON-ECONOMICAL.

Date formation Abandoned: 05/16/2013 Squeeze:  Yes  No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 3490 \*\* Sacks cement on top: 4 \*\* Wireline and Cement Job Summary must be attached.

FORMATION: SALT WASH Status: PRODUCING Treatment Type: \_\_\_\_\_

Treatment Date: 05/20/2013 End Date: \_\_\_\_\_ Date of First Production this formation: 05/21/2013

Perforations Top: 3313 Bottom: 3328 No. Holes: 30 Hole size: 38/100

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

CLEANED PERFS WITH 750 GALLONS OF 7 1/2% HCl.

This formation is commingled with another formation:  Yes  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: 05/20/2013 Hours: 10 Bbl oil: \_\_\_\_\_ Mcf Gas: 10 Bbl H2O: \_\_\_\_\_

Calculated 24 hour rate: Bbl oil: \_\_\_\_\_ Mcf Gas: 24 Bbl H2O: \_\_\_\_\_ GOR: \_\_\_\_\_

Test Method: PRODUCTION METE Casing PSI: \_\_\_\_\_ Tubing PSI: 25 Choke Size: \_\_\_\_\_

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 400 API Gravity Oil: \_\_\_\_\_

Tubing Size: 2 + 3/8 Tubing Setting Depth: 3246 Tbg setting date: 05/17/2013 Packer Depth: 3246

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:

CHECK DAKOTA FORMATION - OPERATOR MARKED BOTH YES AND NO FOR SQUEEZED ENTRY.

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

Signed: \_\_\_\_\_ Print Name: ANDREW BUSCH

Title: VP OF OPERATIONS Date: 8/20/2013 Email: ABUSCH@NATIONAL-FUEL.COM

**Attachment Check List**

Att Doc Num	Name
2430207	FORM 5A SUBMITTED
2430208	WELLBORE DIAGRAM

Total Attach: 2 Files

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passes Permitting.No both Yes and No found. 5A ok.	10/23/2014 3:39:20 PM
Data Entry	CHECK FORMATION DAKOTA SQUEEZED - BOTH YES AND NO ARE MARKED BY OPERATOR.	9/12/2013 11:55:01 AM

Total: 2 comment(s)