

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400714881

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: 10459  
2. Name of Operator: EXTRACTION OIL & GAS LLC  
3. Address: 1888 SHERMAN ST #200  
City: DENVER State: CO Zip: 80203  
4. Contact Name: Troy Owens  
Phone: (720) 557-8303  
Fax:  
Email: towens@extractionog.com

5. API Number 05-123-37254-00  
6. County: WELD  
7. Well Name: KODAK  
Well Number: 12  
8. Location: QtrQtr: SWNW Section: 27 Township: 6N Range: 67W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION  
Treatment Date: 07/20/2014 End Date: 07/24/2014 Date of First Production this formation: 08/15/2014  
Perforations Top: 7717 Bottom: 11901 No. Holes: 0 Hole size:  
Provide a brief summary of the formation treatment: Open Hole: ☒  
This formation is commingled with another formation: ☐ Yes ☒ No  
Total fluid used in treatment (bbl): 47390 Max pressure during treatment (psi): 8622  
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: DISPOSAL  
Total proppant used (lbs): 4378774 Rule 805 green completion techniques were utilized: ☒  
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/05/2014 Hours: 24 Bbl oil: Mcf Gas: Bbl H2O:  
Calculated 24 hour rate: Bbl oil: 51 Mcf Gas: 149 Bbl H2O: 1393 GOR: 3  
Test Method: Measured Casing PSI: Tubing PSI: Choke Size:  
Gas Disposition: SOLD Gas Type: WET Btu Gas: API Gravity Oil:  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7125 Tbg setting date: 08/13/2014 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:

--

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

Signed: \_\_\_\_\_

Print Name: Troy Owens

Title: Engineer

Date: \_\_\_\_\_

Email towens@extractionog.com

:

### **Attachment Check List**

**Att Doc Num**      **Name**

--	--

Total Attach: 0 Files

### **General Comments**

**User Group**      **Comment**

**Comment Date**

--	--	--

Total: 0 comment(s)