

FORM  
5ARev  
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:

400638515

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: 10422 4. Contact Name: Jake Flora  
 2. Name of Operator: PRONGHORN OPERATING LLC Phone: (720) 988  
 3. Address: 8400 E PRENTICE AVENUE #1000 Fax:   
 City: GREENWOOD State: CO Zip: 80111 Email: jakeflora@kfrcorp.com

5. API Number 05-017-07786-00 6. County: CHEYENNE  
 7. Well Name: Daisy Duke Well Number: 1  
 8. Location: QtrQtr: NENW Section: 7 Township: 15S Range: 44W Meridian: 6  
 9. Field Name: LADDER CREEK Field Code: 47600

## Completed Interval

FORMATION: SPERGEN Status: PRODUCING Treatment Type: ACID JOB  
 Treatment Date: 06/18/2014 End Date: 06/18/2014 Date of First Production this formation: 07/17/2014  
 Perforations Top: 5285 Bottom: 5291 No. Holes: 24 Hole size: 01/2

Provide a brief summary of the formation treatment:

Open Hole: ☐

Pumped 500 gal 15% HCL, 32 bbls FW flush

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 44Max pressure during treatment (psi): 200Total gas used in treatment (mcf): 0Fluid density at initial fracture (lbs/gal): Type of gas used in treatment: Min frac gradient (psi/ft): Total acid used in treatment (bbl): 12Number of staged intervals: Recycled water used in treatment (bbl): 0Flowback volume recovered (bbl): 150Fresh water used in treatment (bbl): 32Disposition method for flowback: DISPOSALTotal 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: 07/18/2014 Hours: 24 Bbl oil: 7 Mcf Gas: 0 Bbl H2O: 420  
 Calculated 24 hour rate: Bbl oil: 7 Mcf Gas: 0 Bbl H2O: 420 GOR: 0  
 Test Method: pump Casing PSI: 0 Tubing PSI: 0 Choke Size:   
 Gas Disposition:  Gas Type:  Btu Gas: 0 API Gravity Oil: 0  
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5013 Tbg setting date: 06/19/2014 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:

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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: Jake Flora

Title: Petroleum Engineer Date: \_\_\_\_\_ Email jakeflora@kfrcorp.com  
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### **Attachment Check List**

**Att Doc Num**      **Name**

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