

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400724899

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: 10456
2. Name of Operator: CAERUS PICEANCE LLC
3. Address: 600 17TH STREET #1600N
City: DENVER State: CO Zip: 80202
4. Contact Name: Crissy Venturo
Phone: (720) 352-7916
Fax:
Email: cventuro@progressivepcs.net

5. API Number 05-045-22396-00
6. County: GARFIELD
7. Well Name: ISLAND RANCH
Well Number: 24D-13
8. Location: QtrQtr: LOT 11 Section: 13 Township: 7S Range: 96W Meridian: 6
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/24/2014 End Date: 09/27/2014 Date of First Production this formation: 09/29/2014
Perforations Top: 4193 Bottom: 5845 No. Holes: 189 Hole size: 0.34

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

WFCM - Frac'd with 55,796 bbls slickwater and 1,008 bbls 7.5% HCL Acid.

This formation is commingled with another formation: [ ] Yes [X] No
Total fluid used in treatment (bbl): 55796
Max pressure during treatment (psi): 6896
Total gas used in treatment (mcf): 0
Fluid density at initial fracture (lbs/gal): 8.44
Type of gas used in treatment:
Min frac gradient (psi/ft): 0.72
Total acid used in treatment (bbl): 1008
Number of staged intervals: 7
Recycled water used in treatment (bbl): 55796
Flowback volume recovered (bbl): 6359
Fresh water used in treatment (bbl): 0
Disposition method for flowback: RECYCLE
Total proppant used (lbs): 0
Rule 805 green completion techniques were utilized: [X]
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/01/2014 Hours: 24 Bbl oil: 0 Mcf Gas: 1019 Bbl H2O: 1443
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1019 Bbl H2O: 1443 GOR: 0
Test Method: Flowing Casing PSI: 1150 Tubing PSI: Choke Size: 24/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1080 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 5634 Tbg setting date: 10/16/2014 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:

No wellbore diagram available. All water used in this completion was 100% recycled water.

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

Signed: \_\_\_\_\_ Print Name: Crissy Venturo

Title: Permit Representative Date: \_\_\_\_\_ Email cventuro@progressivepcs.net  
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### Attachment Check List

**Att Doc Num**      **Name**

400724899	FORM 5A SUBMITTED
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)