

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: 400762753 Date Received: 01/05/2015

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: 61250 2. Name of Operator: MULL DRILLING COMPANY INC 3. Address: 1700 N WATERFRONT PKWY B#1200 City: WICHITA State: KS Zip: 67206- 4. Contact Name: MARK SHREVE Phone: (316) 264-6366 Fax: (316) 264-6440 Email: MSHREVE@MULLDRILLING.COM

5. API Number 05-017-07795-00 6. County: CHEYENNE 7. Well Name: CHAMPLIN-ALDRICH "A" Well Number: #7 8. Location: QtrQtr: NESE Section: 33 Township: 13S Range: 44W Meridian: 6 9. Field Name: CHEYENNE WELLS Field Code: 11050

Completed Interval

FORMATION: ST LOUIS Status: PRODUCING Treatment Type: ACID JOB

Treatment Date: 10/13/2014 End Date: 10/24/2014 Date of First Production this formation: 12/10/2014

Perforations Top: 5348 Bottom: 5430 No. Holes: 176 Hole size: 0.52

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

4,000 GALS MCA & 4,000 GALS MOD-202

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

Total fluid used in treatment (bbl): 190 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): 190 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: 12/17/2014 Hours: 24 Bbl oil: 18 Mcf Gas: 0 Bbl H2O: 144 Calculated 24 hour rate: Bbl oil: 18 Mcf Gas: 0 Bbl H2O: 144 GOR: Test Method: PUMPING Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 35 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5441 Tbg setting date: 10/28/2014 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: TANNIS TRITT

Title: EXECUTIVE ASSISTANT Date: 1/5/2015 Email TTRITT@MULLDRILLING.COM  
:

### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400762753	FORM 5A SUBMITTED
400763739	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Mississippian-St. Louis 5306' Mississippian-Spergen 5389' per operator.	1/6/2015 12:08:44 PM
Permit	Requested formation breakdown of the Mississippian.	1/6/2015 10:54:56 AM

Total: 2 comment(s)