

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 100122 2. Name of Operator: GUNNISON ENERGY CORPORATION 3. Address: 1801 BROADWAY #1200 City: DENVER State: CO Zip: 80202 4. Contact Name: Mike Cleary Phone: (303) 296-4222 Fax: (303) 296-4555 Email: mike.cleary@oxbow.com

5. API Number 05-051-06071-00 6. County: GUNNISON 7. Well Name: HOTCHKISS FEDERAL 12-89 Well Number: 18-31 8. Location: QtrQtr: NWNE Section: 18 Township: 12S Range: 89W Meridian: 6 9. Field Name: Field Code:

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 05/13/2007

Perforations Top: 2628 Bottom: 3078 No. Holes: 195 Hole size: 0.37

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

no new treatments. See comments.

This formation is commingled with another formation: [] Yes [X] 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:

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:

Well was previously producing from perms 2628-2688 and open hole from 3045-3135. 4" uncemented liner was installed on September 14, 2013. Top of liner @ 3024'; bottom of liner @ 3125'. Perf'd 3078-3076'; 3075-3072'; and 3072'-3055'. 132 new holes w/Owen here 3 1/8 21 GM .37 EH 43.79PEN 60 deg phasing. Attached is a revised wellbore diagram and copies of the wireline ticket.

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

Signed: _____ Print Name: Patty Johnson
Title: Operations Tech Date: 10/11/2013 Email patty.johnson@oxbow.com
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Attachment Check List

Att Doc Num	Name
400493100	FORM 5A SUBMITTED
400494256	WIRELINE JOB SUMMARY
400494272	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
Permit	Passes Permitting.	2/19/2015 1:14:54 PM
Permit	PENDING: requested WBD.	10/24/2014 9:33:05 AM

Total: 2 comment(s)