

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:
400804190

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: 96155 4. Contact Name: Pauleen Tobin
 2. Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 837-1661
 3. Address: 1700 BROADWAY STE 2300 Fax: (303) 390-4923
 City: DENVER State: CO Zip: 80290 Email: pollyt@whiting.com

5. API Number 05-123-39524-00 6. County: WELD
 7. Well Name: Razor Well Number: 21C-0906
 8. Location: QtrQtr: NENW Section: 21 Township: 10N Range: 58W Meridian: 6
 9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: _____ End Date: _____ Date of First Production this formation: 12/12/2014
Perforations Top: 6145 Bottom: 13990 No. Holes: 1440 Hole size: 3/8

Provide a brief summary of the formation treatment: _____ Open Hole:
40-stage Frac: 4257279# 30/50 Wh snd, 160940# 40/70 Wh snd, 980 bbls 15% HCl, 183723 bbls Slickwater.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 184703 Max pressure during treatment (psi): 7110
 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33
 Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.80
 Total acid used in treatment (bbl): 980 Number of staged intervals: 40
 Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 18999
 Fresh water used in treatment (bbl): 184703 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 4418219 Rule 805 green completion techniques were utilized:
 Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/02/2015 Hours: 24 Bbl oil: 305 Mcf Gas: 264 Bbl H2O: 360
 Calculated 24 hour rate: Bbl oil: 305 Mcf Gas: 264 Bbl H2O: 360 GOR: 866
 Test Method: Separator Casing PSI: 900 Tubing PSI: 215 Choke Size: 40/64
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1775 API Gravity Oil: 33
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 5907 Tbg setting date: 12/29/2014 Packer Depth: 5907

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: Pauleen Tobin
Title: Engineer Tech Date: _____ Email pollyt@whiting.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400804213	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)