

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: 400653556 Date Received: 11/22/2014

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 2. Name of Operator: PRONGHORN OPERATING LLC 3. Address: 8400 E PRENTICE AVENUE #1000 City: GREENWOOD State: CO Zip: 80111 4. Contact Name: Jake Flora Phone: (720) 9885375 Fax: Email: jakeflora@kfrcorp.com

5. API Number 05-017-07787-00 6. County: CHEYENNE 7. Well Name: Betty Well Number: 2 8. Location: QtrQtr: SWSE Section: 6 Township: 15s Range: 44w Meridian: 6 9. Field Name: LADDER CREEK Field Code: 47600

Completed Interval

FORMATION: SPERGEN Status: ABANDONED WELLBORE/COMPLETION Treatment Type: ACID JOB

Treatment Date: 08/19/2014 End Date: 08/19/2014 Date of First Production this formation: Perforations Top: 5282 Bottom: 5310 No. Holes: 40 Hole size: 0

Provide a brief summary of the formation treatment: Open Hole: Pumped 500gal 15% HCL

This formation is commingled with another formation: Total fluid used in treatment (bbl): 33 Max pressure during treatment (psi): 400 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): Type of gas used in treatment: Min frac gradient (psi/ft): Total acid used in treatment (bbl): 12 Number of staged intervals: Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL 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: 08/20/2014 Hours: 2 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 24 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 200 GOR: 0 Test Method: swab 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: 5290 Tbg setting date: 08/19/2014 Packer Depth: 5220

Reason for Non-Production: Wet.

Date formation Abandoned: 08/21/2014 Squeeze: Yes No If yes, number of sacks cmt \*\* Bridge Plug Depth: 5274 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

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

Treatment Date: 08/26/2014 End Date: 08/26/2014 Date of First Production this formation: 10/16/2014

Perforations Top: 5216 Bottom: 5226 No. Holes: 40 Hole size: 0

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

Pumped 500gal 15% HCL.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 44 Max pressure during treatment (psi): 200

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment: Min frac gradient (psi/ft):

Total acid used in treatment (bbl): 12 Number of staged intervals:

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 100

Fresh water used in treatment (bbl): 32 Disposition method for flowback: DISPOSAL

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: 10/16/2014 Hours: 24 Bbl oil: 95 Mcf Gas: 0 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 95 Mcf Gas: 0 Bbl H2O: 0 GOR: 0

Test Method: pump Casing PSI: 0 Tubing PSI: 0 Choke Size:

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 39

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5197 Tbg setting date: 08/27/2014 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: Jake Flora

Title: Petroleum Engineer Date: 11/22/2014 Email jakeflora@kfrcorp.com

Attachment Check List

Table with 2 columns: Att Doc Num, Name. Rows: 400653556 FORM 5A SUBMITTED, 400738828 WIRELINE JOB SUMMARY

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator says St Louis is the producing formation.	3/5/2015 11:24:20 AM
Permit	Formation tops say the Sergen is the producer and not the St. Louis.	11/24/2014 5:52:14 AM

Total: 2 comment(s)