

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:

400808783

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: 10439
2. Name of Operator: CARRIZO NIOBRARA LLC
3. Address: 500 DALLAS STREET #2300
City: HOUSTON State: TX Zip: 77002
4. Contact Name: CYNTHIA PINEL
Phone: (713) 358-6210
Fax:
Email: CYNTHIA.PINEL@CRZO.NET

5. API Number 05-123-40081-00
6. County: WELD
7. Well Name: O'Hare
Well Number: 1-29-11-57
8. Location: QtrQtr: SWSE Section: 29 Township: 11N Range: 57W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/06/2014 End Date: 12/10/2014 Date of First Production this formation: 12/26/2014

Perforations Top: 5979 Bottom: 13206 No. Holes: 26 Hole size: 4 + 1/2

Provide a brief summary of the formation treatment:

Open Hole: ☐

FRACTURE STIMULATION WITH A PORT AND PACKER SYSTEM WITH 5,275,085 LBS OF 20/40 WHITE & 313,320 LBS OF 20/40 CRC SAND. FLUID COUNT INCLUDED 68,155 BBLS OF LINEAR GUAR & 22,486 BBLS OF DUAL XL BORATE. GAS IS USED ONLY TO HEAT THE WATER FOR THE FRACS AND IS ALWAYS PROPANE. AMOUNT IS UNKNOWN.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 90641

Max pressure during treatment (psi): 6406

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal): 8.90

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.79

Total acid used in treatment (bbl):

Number of staged intervals: 26

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl): 6601

Fresh water used in treatment (bbl):

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 5588405

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: PIPELINE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/26/2014 Hours: 24 Bbl oil: 20 Mcf Gas: 0 Bbl H2O: 735

Calculated 24 hour rate: Bbl oil: 20 Mcf Gas: 0 Bbl H2O: 735 GOR: 0

Test Method: 24 HOUR FLOWBAC Casing PSI: 60 Tubing PSI: Choke Size:

Gas Disposition: FLARED Gas Type: WET Btu Gas: 1280 API Gravity Oil: 32

Tubing Size: 2 + 3/8 Tubing Setting Depth: 5530 Tbg setting date: 12/31/2014 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:

CASED HOLE GAMMA RAY LOG PROVIDED UNDER LOG RULE EXCEPTION 317.0 FOR THE O'HARE 2-29-11-57 [05-123-40082]

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

Signed: _____

Print Name: CYNTHIA PINEL

Title: REGULATORY COMP. ANALYST

Date: _____

Email CYNTHIA.PINEL@CRZO.NET

:

Attachment Check List

Att Doc Num

Name

400811429

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)