

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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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: 35080 2. Name of Operator: GRAND MESA OPERATING CO 3. Address: 1700 N. WATERFRONT PKWY BL 600 City: WICHITA State: KS Zip: 67206 4. Contact Name: Michael J Reilly Phone: (316) 265-3000 Fax: (316) 265-3455 Email: pbrewer@gmocks.com

5. API Number 05-121-10096-00 6. County: WASHINGTON 7. Well Name: HUNT Well Number: 1-19 8. Location: QtrQtr: SWNW Section: 19 Township: 2S Range: 54W Meridian: 6 9. Field Name: HOTSPUR Field Code: 37494

Completed Interval

FORMATION: J SAND Status: PRODUCING Treatment Type: ACID JOB

Treatment Date: 04/06/2015 End Date: 04/08/2015 Date of First Production this formation: 04/10/2015 Perforations Top: 4874 Bottom: 4882 No. Holes: 32 Hole size: 3/8

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

Perfed an additional J Sand interval from 4874-4882, w/4shots per foot with 500gals of 10% MCA acid with solvent, surfactant, clay stay blend and deisplaced with KCL water into the zone @ 1/10th bbl/min @ 840 PSI (total load 40bbls).

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

Total fluid used in treatment (bbl): 40 Max pressure during treatment (psi): 840 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): 28 Flowback volume recovered (bbl): 0 Fresh water used in treatment (bbl): 0 Disposition method for flowback: Total proppant used (lbs): 0 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:

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

Signed: _____ Print Name: Michael J Reilly
Title: President Date: _____ Email: pbrewer@gmocks.com
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Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)