

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:

400605670

Date Received:

09/30/2014

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: 10261
2. Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION
3. Address: 730 17TH ST STE 610
City: DENVER State: CO Zip: 80202
4. Contact Name: Joe Richardson
Phone: (303) 893-2503
Fax:
Email: jrichardson@bayswater.us

5. API Number 05-001-09771-00
6. County: ADAMS
7. Well Name: Badger Creek
Well Number: 22-32B
8. Location: QtrQtr: SWNE Section: 22 Township: 2S Range: 57W Meridian: 6
9. Field Name: BADGER CREEK Field Code: 5050

Completed Interval

FORMATION: D SAND Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 03/31/2014

Perforations Top: 5296 Bottom: 5298 No. Holes: 8 Hole size: 050/100

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

No stimulation treatment was pumped on this well. The well was shot, swab tested and put on production.

This formation is commingled with another formation: ☐ Yes ☒ 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: 03/31/2014 Hours: 24 Bbl oil: 8 Mcf Gas: 0 Bbl H2O: 86

Calculated 24 hour rate: Bbl oil: 8 Mcf Gas: 0 Bbl H2O: 86 GOR: 0

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

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 38

Tubing Size: 2 + 7/8 Tubing Setting Depth: 5382 Tbg setting date: 01/08/2014 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: Joe Richardson

Title: Sr. Operations Engineer Date: 9/30/2014 Email jrichardson@bayswater.us
:

Attachment Check List

Att Doc Num **Name**

400605670	FORM 5A SUBMITTED
400849910	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Agency	Returning to draft. No treatment information or dates.	1/16/2015 2:22:20 PM
--------	--	-------------------------

Total: 1 comment(s)