

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: 400926905

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 4. Contact Name: CAROL PRUITT
2. Name of Operator: CARRIZO NIOBRARA LLC Phone: (713) 328-1000
3. Address: 500 DALLAS STREET #2300 City: HOUSTON State: TX Zip: 77002 Fax: (713) 328-1060 Email: CAROL.PRUITT@CRZO.NET

5. API Number 05-123-37743-00 6. County: WELD
7. Well Name: Bob White Well Number: 2-36-8-62
8. Location: QtrQtr: SWSW Section: 36 Township: 8N Range: 62W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/02/2013 End Date: 10/03/2013 Date of First Production this formation: 10/11/2013

Perforations Top: 6632 Bottom: 11075 No. Holes: Hole size:

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

FRACTURE STIMULATED THROUGH A PORT AND PACKER SYSTEM WITH 3,243,144 LBS 20/40 SAND AND 54,273 BBLS FRESH WATER. NO GAS OR ACID USED IN THIS TREATMENT.

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

Total fluid used in treatment (bbl): 54273 Max pressure during treatment (psi): 4811
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): 0.86
Total acid used in treatment (bbl): Number of staged intervals: 15
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 20623
Fresh water used in treatment (bbl): 54273 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 3243144 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: 10/11/2013 Hours: 24 Bbl oil: 35 Mcf Gas: 0 Bbl H2O: 709
Calculated 24 hour rate: Bbl oil: 35 Mcf Gas: 0 Bbl H2O: 709 GOR: 0
Test Method: 24 HR FLOWBACK Casing PSI: 150 Tubing PSI: Choke Size: 26/64
Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 36
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6350 Tbg setting date: 10/23/2013 Packer Depth: 6344

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:

NO GAS PRODUCED DURING THIS TEST. GAS ANALYSIS OBTAINED LATER ATTACHED AS "OTHER" FORM 10 SUBMITTED, DOC 400928619

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

Signed: _____ Print Name: CAROL PRUITT

Title: REGULATORY COMPLIANCE Date: _____ Email: CAROL.PRUITT@CRZO.NET

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400928608	OTHER

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)