

FORM
5ARev
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:

400934135

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: Madelon Raney

Phone: (713) 358-6218

Fax:

Email: madelon.raney@crzo.net

5. API Number 05-123-37593-00

7. Well Name: Nelson Ranches

6. County: WELD

Well Number: 1-33-10-59

8. Location: QtrQtr: SWSE

Section: 28

Township: 10N

Range: 59W

Meridian: 6

9. Field Name: DJ HORIZONTAL NIOBRARA

Field Code: 16950

Completed Interval

FORMATION: NIOBRARA

Status: PRODUCING

Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/13/2013

End Date: 11/14/2013

Date of First Production this formation: 11/19/2013

Perforations

Top: 7543

Bottom: 11659

No. Holes:

Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☒

FRACTURE STIMULATED IN 11 STAGES WITH A PORT AND PACKER SYSTEM WITH 2,373,713 LBS 20/40 SAND AND 36,726 BBLS FRESH WATER. GAS AND ACID WAS NOT USED.

This formation is commingled with another formation:

☐ Yes☒ No

Total fluid used in treatment (bbl): 36726

Max pressure during treatment (psi): 4678

Total gas used in treatment (mcf): 0

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

Type of gas used in treatment:

Min frac gradient (psi/ft): 0.80

Total acid used in treatment (bbl): 0

Number of staged intervals: 11

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 13956

Fresh water used in treatment (bbl): 36726

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 2373719

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: 11/22/2013

Hours: 24

Bbl oil: 126

Mcf Gas: 0

Bbl H2O: 343

Calculated 24 hour rate:

Bbl oil: 126

Mcf Gas: 0

Bbl H2O: 343

GOR: 0

Test Method: 24 HR FLOWBACK

Casing PSI: 55

Tubing PSI: 0

Choke Size: 36

Gas Disposition:

Gas Type: WET

Btu Gas: 1463

API Gravity Oil: 35

Tubing Size: 2 + 3/8

Tubing Setting Depth: 6100

Tbg setting date: 11/27/2013

Packer Depth:

Reason for Non-Production: GAS DID NOT PRODUCE UNTIL AFTER THE TEST DATE.

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:

Gas Analysis was ran at a later date than the test date.

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

Signed: _____

Print Name: Madelon Raney _____

Title: Regulatory Compl. Analyst _____

Date: _____

Email: madelon.raney@crzo.net _____

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Attachment Check List

Att Doc Num

Name

400934155

OTHER

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)