

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



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Document Number:

400970567

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: 10459  
2. Name of Operator: EXTRACTION OIL & GAS LLC  
3. Address: 370 17TH STREET SUITE 5300  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Troy Owens  
Phone: (720) 557-8303  
Fax: \_\_\_\_\_  
Email: towens@extractionog.com

5. API Number 05-123-40349-00  
6. County: WELD  
7. Well Name: Waag  
Well Number: 23  
8. Location: QtrQtr: SESW Section: 19 Township: 7N Range: 65W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

### Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/12/2015 End Date: 11/13/2015 Date of First Production this formation: 12/05/2015

Perforations Top: 7612 Bottom: 11939 No. Holes: \_\_\_\_\_ Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole: ☒

28 stage sliding sleeve;  
55255 total bbls of fluid pumped, 1944 bbls of recycled water, 53311 bbls of fresh water;  
5607681 lbs of 40/70 proppant pumped

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

Total fluid used in treatment (bbl): 55255 Max pressure during treatment (psi): 7653

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 0.97

Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: 28

Recycled water used in treatment (bbl): 1944 Flowback volume recovered (bbl): 7483

Fresh water used in treatment (bbl): 53311 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 5607681 Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

### Test Information:

Date: 12/07/2015 Hours: 24 Bbl oil: 99 Mcf Gas: 120 Bbl H2O: 1014

Calculated 24 hour rate: Bbl oil: 99 Mcf Gas: 120 Bbl H2O: 1014 GOR: 1212

Test Method: Measured Casing PSI: 700 Tubing PSI: \_\_\_\_\_ Choke Size: 18/64

Gas Disposition: FLARED Gas Type: WET Btu Gas: 1298 API Gravity Oil: 38

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:

No tubing installed for flowback, no tubing pressure information for well test

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

Signed: \_\_\_\_\_

Print Name: Troy Owens

Title: Engineer

Date: \_\_\_\_\_

Email : towens@extractionog.com

### **Attachment Check List**

**Att Doc Num**      **Name**

400970582

WELLBORE DIAGRAM

Total Attach: 1 Files

### **General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)