

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: 400970944

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

5. API Number 05-123-41433-00 6. County: WELD
 7. Well Name: Troudt Well Number: 1
 8. Location: QtrQtr: SESE Section: 32 Township: 2N Range: 67W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/18/2015 End Date: 10/31/2015 Date of First Production this formation: 01/25/2016

Perforations Top: 7836 Bottom: 17780 No. Holes: 1767 Hole size: 11/25

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

39 cemented sleeve half stages, 48 plug and perf stages;
169194 bbls of fresh water pumped;
13703184 lbs of 40/70 proppant pumped

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 169194 Max pressure during treatment (psi): 9740

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): 0.84

Total acid used in treatment (bbl): 48 Number of staged intervals: 87

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): 851

Fresh water used in treatment (bbl): 169194 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 13703184 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/27/2016 Hours: 24 Bbl oil: 606 Mcf Gas: 803 Bbl H2O: 465

Calculated 24 hour rate: Bbl oil: 606 Mcf Gas: 803 Bbl H2O: 465 GOR: 1325

Test Method: Measured Casing PSI: 2251 Tubing PSI: 1742 Choke Size: 18/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1120 API Gravity Oil: 51

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7423 Tbg setting date: 12/23/2015 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: Troy Owens
Title: Engineer Date: _____ Email: towens@extractionog.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400970960	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)