

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:

401013252

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: 69175

2. Name of Operator: PDC ENERGY INC

3. Address: 1775 SHERMAN STREET - STE 3000

City: DENVER State: CO Zip: 80203

4. Contact Name: Ally Gale

Phone: (303) 831-3931

Fax: (303) 860-5838

Email: alexandria.gale@pdce.com

5. API Number 05-123-24641-00

7. Well Name: SATER

8. Location: QtrQtr: SESW Section: 19 Township: 4N Range: 63W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 24-19U

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/13/2007 End Date: 09/20/2007 Date of First Production this formation: 09/20/2007
Perforations Top: 6521 Bottom: 6780 No. Holes: 24 Hole size: 34/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Niobrara perms 6521-6590 and Codell perms 6772-6780

Total Fluid:

3356 bbls Vistar 20#

500 gal (15.87 bbls) 15% HCl Acid

995 bbls Slickwater

Total Proppant:

337,660 lbs 20/40 White Sand

16,000 lbs SB Exel 20/40

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

Total fluid used in treatment (bbl): 4366

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): 15

Number of staged intervals: _____

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): 4351

Disposition method for flowback: _____

Total proppant used (lbs): 339260

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6724 Tbg setting date: 11/05/2007 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:

This Niobrara-Codell recompleat was completed in 2007 by Unioil. However, the 5A was never received. PDC is filing this 5A as the current operator of record with the information available to us. PDC was not the operator that performed the recompleat.

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

Signed: _____ Print Name: Ally Gale

Title: Regulatory Technician I Date: _____ Email: alexandria.gale@pdce.com

Attachment Check List

Att Doc Num **Name**

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)