

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:

401101475

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: 10447  
2. Name of Operator: URSA OPERATING COMPANY LLC  
3. Address: 1050 17TH STREET #1700  
City: DENVER State: CO Zip: 80265  
4. Contact Name: JENNIFER LIND  
Phone: (720) 508-8362  
Fax:  
Email: JLIND@URSARESOURCES.COM

5. API Number 05-045-22963-00  
6. County: GARFIELD  
7. Well Name: MONUMENT RIDGE B  
Well Number: 23C-08-07-95  
8. Location: QtrQtr: SESE Section: 8 Township: 7S Range: 95W Meridian: 6  
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/04/2016 End Date: 07/26/2016 Date of First Production this formation: 08/02/2016

Perforations Top: 4852 Bottom: 7829 No. Holes: 540 Hole size: 0.37

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

Frac'd with 151,192 bbls 2% slickwater and no proppant. Frac pair with Monument Ridge B 43C-08-07-95 (API 05-045-22914) and Monument Ridge B 33B-08-07-95 (API 05-045-22903).

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

Total fluid used in treatment (bbl): 151192 Max pressure during treatment (psi): 7819

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.40

Type of gas used in treatment: Min frac gradient (psi/ft): 0.63

Total acid used in treatment (bbl): Number of staged intervals: 10

Recycled water used in treatment (bbl): 151192 Flowback volume recovered (bbl): 47427

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

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

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/16/2016 Hours: 24 Bbl oil: 0 Mcf Gas: 2988 Bbl H2O: 1880

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 2988 Bbl H2O: 1880 GOR: 0

Test Method: Flowing Casing PSI: 650 Tubing PSI: 1000 Choke Size: 64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1064 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 6346 Tbg setting date: 08/02/2016 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:

Wellbore diagram attached.

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

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

Print Name: JENNIFER LIND

Title: REGULATORY ANALYST

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

Email: JLIND@URSARESOURCE.COM

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### **Attachment Check List**

**Att Doc Num**

**Name**

401101510

WELLBORE DIAGRAM

Total Attach: 1 Files

### **General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)