

**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



DE	ET	OE	ES
----	----	----	----

Document Number:
400715687

Date Received:
11/07/2016

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: <u>69175</u>	4. Contact Name: <u>Ally Gale</u>
2. Name of Operator: <u>PDC ENERGY INC</u>	Phone: <u>(303) 831-3931</u>
3. Address: <u>1775 SHERMAN STREET - STE 3000</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: <u>alexandria.gale@pdce.com</u>

5. API Number <u>05-123-39223-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Alles</u>	Well Number: <u>22S-232</u>
8. Location: QtrQtr: <u>NESE</u> Section: <u>22</u> Township: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/15/2014 End Date: 05/22/2014 Date of First Production this formation: 06/20/2014
Perforations Top: 7352 Bottom: 11888 No. Holes: Hole size:

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

20 Stage Sliding Sleeve
Stages 1-2 Frac'd 5/15/2014, Stages 5-20 frac'd 5/21/2014-5/22/2014
Total Fluid: 63,384 bbls
Gel Fluid: 49,737 bbls
Slickwater fluid: 13,623 bbls
15% HCl Acid: 24 bbls
Total Proppant: 3,855,140 lbs
Silica Proppant: 3,855,140 lbs
Method for determining flowback: measuring flowback tank volumes

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 63384 Max pressure during treatment (psi): 3924
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 1.08
Total acid used in treatment (bbl): 24 Number of staged intervals: 20
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 8595
Fresh water used in treatment (bbl): 63360 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 3855140 Rule 805 green completion techniques were utilized:
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 07/20/2014 Hours: 24 Bbl oil: 335 Mcf Gas: 1095 Bbl H2O: 53
Calculated 24 hour rate: Bbl oil: 335 Mcf Gas: 1095 Bbl H2O: 53 GOR: 3268
Test Method: Flowing Casing PSI: 2126 Tubing PSI: 1379 Choke Size: 16/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1293 API Gravity Oil: 53
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6904 Tbg setting date: 06/16/2014 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:

Swell packer set at 7352'

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 Tech Date: 11/7/2016 Email: alexandria.gale@pdce.com

Attachment Check List

Att Doc Num	Name
400715687	FORM 5A SUBMITTED
401126920	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Ready to pass.	11/08/2016
Permit	Return to draft for AOC settlement.	09/06/2016

Total: 2 comment(s)