

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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 05-123-41901-00
6. County: WELD
7. Well Name: Becker Ranch
Well Number: 5J-303
8. Location: QtrQtr: NWNW Section: 5 Township: 3N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: FORT HAYS Status: COMMINGLED Treatment Type:

Treatment Date: End Date: Date of First Production this formation:

Perforations Top: 7552 Bottom: 7591 No. Holes: 720 Hole size: 48/100

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

Completed Depths: 7552-7591

This formation is commingled with another formation: [X] Yes [ ] No

Total fluid used in treatment (bbl):
Total gas used in treatment (mcf):
Type of gas used in treatment:
Total acid used in treatment (bbl):
Recycled water used in treatment (bbl):
Fresh water used in treatment (bbl):
Total proppant used (lbs):
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal):
Min frac gradient (psi/ft):
Number of staged intervals:
Flowback volume recovered (bbl):
Disposition method for flowback:
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: 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.

FORMATION: NIOBRARA-FT HAYS Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/06/2015 End Date: 11/13/2015 Date of First Production this formation: 11/23/2015

Perforations Top: 7552 Bottom: 11404 No. Holes: 720 Hole size: 48/100

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

20 Stage Plug and Perf, Perf'd from 7552-11357, Open sliding sleeve at 11404'

Total Fluid: 85,592 bbls  
 Gel Fluid: 59,824 bbls  
 Slickwater Fluid: 24,773 bbls  
 15% HCl Acid: 995 bbls  
 Total Proppant: 3,961,370 lbs  
 Silica Proppant: 3,961,370 lbs  
 Method for determining flowback: measuring flowback tank volumes

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 85592 Max pressure during treatment (psi): 5152

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): 0.99

Total acid used in treatment (bbl): 995 Number of staged intervals: 20

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): 4427

Fresh water used in treatment (bbl): 84597 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 3961370 Rule 805 green completion techniques were utilized:

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

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

**Test Information:**

Date: 12/01/2015 Hours: 24 Bbl oil: 158 Mcf Gas: 1042 Bbl H2O: 323

Calculated 24 hour rate: Bbl oil: 158 Mcf Gas: 1042 Bbl H2O: 323 GOR: 6594

Test Method: Flowing Casing PSI: 2474 Tubing PSI: 1737 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1288 API Gravity Oil: 53

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7075 Tbg setting date: 11/17/2015 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.

FORMATION: NIORARA Status: COMMINGLED Treatment Type: \_\_\_\_\_  
 Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: \_\_\_\_\_  
 Perforations Top: 7591 Bottom: 11404 No. Holes: 720 Hole size: 48/100  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Completed Depths: 7591-11404

This formation is commingled with another formation:  Yes  No  
 Total fluid used in treatment (bbl): \_\_\_\_\_ 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): \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_  
 Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_  
 Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_  
 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: \_\_\_\_\_ 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: \_\_\_\_\_ 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: \_\_\_\_\_

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: 11/4/2016 Email: alexandria.gale@pdce.com

**Attachment Check List**

Att Doc Num	Name
400950882	FORM 5A SUBMITTED
401129213	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

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

Total: 2 comment(s)