

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



Table with columns DE, ET, OE, ES

Document Number: 2452494

Date Received: 08/22/2016

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: 10626
2. Name of Operator: DOVER ATWOOD CORPORATION
3. Address: 1875 HARSH AVENUE SE
City: MASSILLON State: OH Zip: 44646
4. Contact Name: JOHN LEVENGOOD
Phone: (330) 809-0630
Fax: (330) 809-0670
Email: JLevengood07@gmail.com

5. API Number 05-009-06084-00
6. County: BACA
7. Well Name: EATON, H
Well Number: 1-22
8. Location: QtrQtr: SENW Section: 22 Township: 31S Range: 44W Meridian: 6
9. Field Name: VILAS Field Code: 87900

Completed Interval

FORMATION: TOPEKA Status: PRODUCING Treatment Type: ACID JOB
Treatment Date: 06/14/2016 End Date: 06/14/2016 Date of First Production this formation: 06/24/1974
Perforations Top: 3270 Bottom: 3404 No. Holes: 43 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: []

Pull rods and tubing, run tubing back in well. Dump 750 gallons of 15% HCL down tubing on vacuum, chase with 500 gallons of KcL 2% fresh water, dump additional KcL 2% fresh water down casing on vacuum. Swab 10 barrel into stock tank, run pump back in well.

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

Total fluid used in treatment (bbl): 41
Total gas used in treatment (mcf): 0
Type of gas used in treatment:
Total acid used in treatment (bbl): 18
Recycled water used in treatment (bbl): 0
Fresh water used in treatment (bbl): 23
Total proppant used (lbs): 0
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal): 0.00
Min frac gradient (psi/ft): 0.00
Number of staged intervals: 0
Flowback volume recovered (bbl): 0
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.

Comment:

--

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

Signed: _____ Print Name: JOHN LEVENGOOD

Title: PRESIDENT Date: 7/21/2016 Email: JLevengood07@gmail.com
:

Attachment Check List

Att Doc Num **Name**

2452494	FORM 5A SUBMITTED
---------	-------------------

Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)