FORM 5A Rev 06/12

State of Colorado
Oil and Gas Conservation Commission

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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: 8960
2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY
3. Address: 410 17TH STREET SUITE #1400
City: DENVER State: CO Zip: 80202
4. Contact Name: Jessica Azzolina
Phone: (720) 440-6100
Fax: (720) 279-2331
Email: jazzolina@bonanzacrk.com

5. API Number 05-123-26114-00
6. County: WELD
7. Well Name: ALLES
Well Number: 41-31
8. Location: QtrQtr: NENE Section: 31 Township: 5N Range: 63W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/14/2012 End Date: 12/15/2012 Date of First Production this formation: 09/19/2007

Perforations Top: 6485 Bottom: 6564 No. Holes: 48 Hole size:

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

Codell was refrac'd using 3161 bbls of pHaserfrac fluid, 762 bbls of fresh water, and 254,693 # of 20/40 Ottawa sand. ATP 5776, ATR 22 bpm, final ISDP 3471 psi.

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

Total fluid used in treatment (bbl): 3161
Max pressure during treatment (psi): 6109
Total gas used in treatment (mcf): 0
Fluid density at initial fracture (lbs/gal): 8.33
Type of gas used in treatment:
Min frac gradient (psi/ft): 0.89
Total acid used in treatment (bbl): 0
Number of staged intervals: 8
Recycled water used in treatment (bbl): 0
Flowback volume recovered (bbl): 3277
Fresh water used in treatment (bbl): 762
Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 254693
Rule 805 green completion techniques were utilized: [X]
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 + 7/8 Tubing Setting Depth: 6163 Tbg setting date: 12/20/2012 Packer Depth:

Reason for Non-Production: Refracing Niobrara (commingled formations Cdl/Nio) before flowback

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-CODELL Status: PRODUCING Treatment Type:

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

Perforations Top: 6322 Bottom: 6576 No. Holes: Hole size:

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

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: 01/17/2013 Hours: 72 Bbl oil: 75 Mcf Gas: 280 Bbl H2O: 43

Calculated 24 hour rate: Bbl oil: 35 Mcf Gas: 109 Bbl H2O: 21 GOR: 3114

Test Method: flowing Casing PSI: 950 Tubing PSI: 875 Choke Size:

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1311 API Gravity Oil: 43

Tubing Size: 2 + 7/8 Tubing Setting Depth: 6163 Tbg setting date: 12/20/2012 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 Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/15/2012 End Date: 12/22/2012 Date of First Production this formation: 09/19/2007

Perforations Top: 6322 Bottom: 6464 No. Holes: 48 Hole size:

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

Niobrara was refrac'd using 3133 bbls of pHaserfrac fliud, 45 bbls of 15% HCl acid, 13 bbls of fresh water, and 260,000# of 30/50 Ottawa sand. Nio A bench 6322'-6328', B bench 6396'-6408', C bench 6458'-6464'.

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

Total fluid used in treatment (bbl): 3133 Max pressure during treatment (psi): 6345

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: Min frac gradient (psi/ft): 0.89

Total acid used in treatment (bbl): 45 Number of staged intervals: 10

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 3249

Fresh water used in treatment (bbl): 13 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 260000 Rule 805 green completion techniques were utilized: [X]

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: Jessica Azzolina

Title: Engineering Tech Date: 1/10/2017 Email: jazzolina@bonanzacrk.com

Attachment Check List

Att Doc Num	Name
401180959	FORM 5A SUBMITTED
401180969	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)