

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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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: 10000 4. Contact Name: Patti Campbell
2. Name of Operator: BP AMERICA PRODUCTION COMPANY Phone: (970) 335-3828
3. Address: 380 AIRPORT RD City: DURANGO State: CO Zip: 81303 Fax: Email: patricia.campbell@bp.com

5. API Number 05-067-09600-00 6. County: LA PLATA
7. Well Name: BLACK 21-22 Well Number: 4
8. Location: QtrQtr: SENE Section: 22 Township: 34N Range: 8W Meridian: M
9. Field Name: IGNACIO BLANCO Field Code: 38300

Completed Interval

FORMATION: FRUITLAND COAL Status: PRODUCING Treatment Type: ACID JOB

Treatment Date: 01/26/2017 End Date: 01/26/2017 Date of First Production this formation: 12/10/2008
Perforations Top: 2903 Bottom: 3288 No. Holes: 352 Hole size: 0.44

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

Pumped 24bbls with 7.5% (approx. 2bbls) acid. Flushed with 46bbls .5% KCL water. Pumped 600# of soda ash in a 15bbl water to neutralize. Shut well in for 36 hours.

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

Total fluid used in treatment (bbl): 85 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): 2 Number of staged intervals:
Recycled water used in treatment (bbl): Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 83 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:

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

Signed: \_\_\_\_\_ Print Name: Patti Campbell  
Title: Regulatory Analyst Date: \_\_\_\_\_ Email: patricia.campbell@bp.com  
:

### Attachment Check List

**Att Doc Num**      **Name**

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Total Attach: 0 Files

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

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