



COMPLETED INTERVAL REPORT

This form is to be submitted or updated each time a new formation is completed or abandoned. This form shall be transmitted within (30) days of work. Additional information is found under Rule 308. Complete a section for each formation completed or recompleted including all attempted completions. Attach as many pages as required to fully describe the work.

Complete the
Attachment Checklist

| | Oper | OGCC |
|-----------------------|------|------|
| Wellbore Diagram | | |
| Site Facility Diagram | | |
| | | |
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|--|---|
| 1. OGCC Operator Number: 56565 | 4. Contact Name and Telephone Lynne Moon |
| 2. Name of Operator: Merit Energy Company | No: 972-628-1569 |
| 3. Address: 13727 Noel Rd, Suite 500 | Fax: 972-960-1252 |
| City: Dallas State: TX Zip: 75240 | |
| 5. API Number: 05-123-21354 | 6. County: Weld |
| 7. Well Name: Totems | Well Number: 34-24 |
| 8. Location (QtrQtr, Sec, Twp, Rng, Meridian) SW SE Sec. 24-T1N-R68W | |

List in order of completion:

| | | |
|--|---|--|
| FORMATION: JSND | <input type="checkbox"/> Producing <input type="checkbox"/> Abandoned <input checked="" type="checkbox"/> Shut-In | <input type="checkbox"/> Commingled |
| Perforations Gross Interval: Top 8298' | Bottom 8326' | No. Holes: 84 |
| Size: | | Open Hole Completion (check if yes) <input type="checkbox"/> |

Formation Treatment Describe:
Frac w/149,236 gals. Frac fluid + 450,320# 20/40 sand.

| | | | | |
|---|-------------------|--|--------------------------------|------------------------|
| Test Information Date: | Hours: | Bbls Oil: | MCF Gas: | Bbls H ₂ O: |
| Production Test Method: | Casing Pressure: | Flowing Tubing Pressure: | Choke Size: | |
| API Gravity Oil: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate | BTU Gas: | <input type="checkbox"/> Wet <input type="checkbox"/> CO ₂ <input type="checkbox"/> Helium <input type="checkbox"/> Dry <input type="checkbox"/> Coal Gas <input type="checkbox"/> Other: | Gas Disposition: | |
| Calculated 24 Hr. Rate | Bbls Oil: #DIV/0! | MCF Gas: #DIV/0! | Bbls H ₂ O: #DIV/0! | GOR: #DIV/0! |

| | | | | |
|--|----------------------|---|---------------|--|
| Production Method: | | | | |
| Tubing Size: 2-3/8" | Setting Depth: 8244' | Packer Depth: | | |
| Reason for Non-Production: Shut-In for Pressure Build-Up | | | | |
| Abandonment of Zone | Date: | Squeezed: <input type="checkbox"/> Y <input type="checkbox"/> N | Sacks Cement: | |
| Bridge Plug Depth: | Sacks Cement on Top: | | | |

| | | |
|----------------------------------|--|--|
| FORMATION: | <input type="checkbox"/> Producing <input type="checkbox"/> Abandoned <input type="checkbox"/> Shut-In | <input type="checkbox"/> Commingled |
| Perforations Gross Interval: Top | Bottom | No. Holes: |
| Size: | | Open Hole Completion (check if yes) <input type="checkbox"/> |

Formation Treatment Describe:

| | | | | |
|---|------------------|--|------------------------|------------------------|
| Test Information Date: | Hours: | Bbls Oil: | MCF Gas: | Bbls H ₂ O: |
| Production Test Method: | Casing Pressure: | Flowing Tubing Pressure: | Choke Size: | |
| API Gravity Oil: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate | BTU Gas: | <input type="checkbox"/> Wet <input type="checkbox"/> CO ₂ <input type="checkbox"/> Helium <input type="checkbox"/> Dry <input type="checkbox"/> Coal Gas <input type="checkbox"/> Other: | Gas Disposition: | |
| Calculated 24 Hr. Rate | Bbls Oil: | MCF Gas: | Bbls H ₂ O: | GOR: |

| | | | | |
|----------------------------|----------------------|---|---------------|--|
| Production Method: | | | | |
| Tubing Size: | Setting Depth: | Packer Depth: | | |
| Reason for Non-Production: | | | | |
| Abandonment of Zone | Date: | Squeezed: <input type="checkbox"/> Y <input type="checkbox"/> N | Sacks Cement: | |
| Bridge Plug Depth: | Sacks Cement on Top: | | | |

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

Print Name: Lynne Moon

Signed: Lynne Moon Title: Sr. Regulatory Analyst Date: 07/18/03