

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



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Document Number:

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Date Received:

05/11/2017

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: 10110  
2. Name of Operator: GREAT WESTERN OPERATING COMPANY LLC  
3. Address: 1801 BROADWAY #500  
City: DENVER State: CO Zip: 80202  
4. Contact Name: Scot Donato  
Phone: (303) 398-0537  
Fax:  
Email: regulatorypermitting@gwogco.com

5. API Number 05-123-24362-00  
6. County: WELD  
7. Well Name: GREAT WESTERN  
Well Number: 26-32  
8. Location: QtrQtr: SENE Section: 26 Township: 6N Range: 67W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 10/21/2007

Perforations Top: 7270 Bottom: 7290 No. Holes: 80 Hole size: 21/50

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

A flow-thru composite plug was set above the Codell formation, prior to the Niobrara completion.

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.

FORMATION: NIOBRARA-CODELL		Status: PRODUCING		Treatment Type: _____	
Treatment Date: _____		End Date: _____		Date of First Production this formation: 02/06/2008	
Perforations	Top: 6958	Bottom: 7290	No. Holes: 232	Hole size: 21/50	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
This formation is commingled with another formation:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/>		
Reason why green completion not utilized: _____					

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

**Test Information:**

Date: 11/26/2007	Hours: 24	Bbl oil: 40	Mcf Gas: 20	Bbl H2O: 25
Calculated 24 hour rate:	Bbl oil: 40	Mcf Gas: 20	Bbl H2O: 25	GOR: 500
Test Method: Flowing	Casing PSI: 200	Tubing PSI: _____	Choke Size: 16/64	
Gas Disposition: SOLD	Gas Type: WET	Btu Gas: 1305	API Gravity Oil: 47	
Tubing Size: 2 + 3/8	Tubing Setting Depth: 4256	Tbg setting date: 01/15/2008	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: 11/21/2007 End Date: 11/21/2007 Date of First Production this formation: 11/23/2007

Perforations Top: 6958 Bottom: 7098 No. Holes: 152 Hole size: 21/50

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

Frac Niobrara w/ 4131 bbls fluid (Dynaflow 2 WR) 238,000# 30/50 sand & 17,000# 20/40 resin coated sand. Treat @ an average of 4603# 51.2 bpm. Max rate 51.5 bpm, max pressure 5304#.

This formation is commingled with another formation: ☒ Yes ☐ No

Total fluid used in treatment (bbl): 4131

Max pressure during treatment (psi): 5304

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): 0.91

Total acid used in treatment (bbl): 0

Number of staged intervals: 1

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 1096

Fresh water used in treatment (bbl): 4131

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 255000

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:

This form 5A is being submitted to document the Niobrara formation that was treated in 05/2011 and never reported, the Codell & Niobrara formations were commingled immediately upon the completion of the Niobrara formation.

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

Signed: Print Name: Scot Donato

Title: Regulatory Manager Date: 5/11/2017 Email: regulatorypermitting@gwogco.com

### Attachment Check List

Att Doc Num Name

400980030 FORM 5A SUBMITTED

Total Attach: 1 Files

### General Comments

User Group Comment Comment Date

Permit Returned to draft for AOC settlement. 12/07/2016

Total: 1 comment(s)