

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:

2452493

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) 323-1930  
Fax: (330) 809-0730  
Email: jlevengood@gmail.com

5. API Number 05-009-06432-00  
6. County: BACA  
7. Well Name: BRYAN  
Well Number: 1-11  
8. Location: QtrQtr: NESE Section: 11 Township: 31S Range: 42W Meridian: 6  
9. Field Name: GREENWOOD Field Code: 33250

Completed Interval

FORMATION: TOPEKA Status: PRODUCING Treatment Type: ACID JOB  
Treatment Date: 06/06/2016 End Date: 06/08/2016 Date of First Production this formation: 04/15/1985  
Perforations Top: 3211 Bottom: 3216 No. Holes: 32 Hole size:

Provide a brief summary of the formation treatment:

Open Hole: ☐

pull rods and tubing, test tubing for leaks, replace 3 joints, run tubing back in hole treat pipe and hole with 750 gal. of HCL 15% chase with 1000 gallons of fresh water. swab into tank, run rods in hole, put well back to pump. well on vacuum during entire work over.

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

Total fluid used in treatment (bbl): 41 Max pressure during treatment (psi): 0  
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal):  
Type of gas used in treatment: Min frac gradient (psi/ft):  
Total acid used in treatment (bbl): 17 Number of staged intervals: 1  
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 0  
Fresh water used in treatment (bbl): 24 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 0 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: 7/11/2016

Email jlevengood@gmail.com

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### **Attachment Check List**

**Att Doc Num**

**Name**

2452493

FORM 5A SUBMITTED

Total Attach: 1 Files

### **General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)