

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



DE	ET	OE	ES
----	----	----	----

Document Number: 401293045

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: 10460 4. Contact Name: Randy Wheat  
 2. Name of Operator: HIGH PLAINS ENERGY LLC Phone: (720) 480-7776  
 3. Address: 4545 S MONACO STREET #116 Fax: (720) 920-9087  
 City: DENVER State: CO Zip: 80237 Email: randy@highplainsenergyllc.com

5. API Number 05-075-09424-00 6. County: LOGAN  
 7. Well Name: Dune Ridge State Well Number: 32-3  
 8. Location: QtrQtr: NESE Section: 32 Township: 7N Range: 52W Meridian: 6  
 9. Field Name: DUNE RIDGE Field Code: 19000

Completed Interval

FORMATION: D SAND Status: SHUT IN Treatment Type: \_\_\_\_\_

Treatment Date: 04/11/2014 End Date: 04/11/2014 Date of First Production this formation: 05/01/2014

Perforations Top: 4469 Bottom: 4473 No. Holes: 16 Hole size: 0.43

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Swabbed on Perforations

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: 04/11/2014 Hours: 8 Bbl oil: 2 Mcf Gas: 0 Bbl H2O: 50  
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 0 GOR: 0  
 Test Method: SWAB Casing PSI: 275 Tubing PSI: 0 Choke Size: 0  
 Gas Disposition: VENTED Gas Type: WET Btu Gas: 1350 API Gravity Oil: 0  
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 4914 Tbg setting date: 04/11/2014 Packer Depth: 4439

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: J SAND Status: SHUT IN Treatment Type:

Treatment Date: 04/09/2014 End Date: 04/10/2014 Date of First Production this formation:

Perforations Top: 4511 Bottom: 4518 No. Holes: 28 Hole size: 0.43

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

Swabbed on Perfs-WET

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: 04/09/2014 Hours: 8 Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 60

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 0 Bbl H2O: 0 GOR: 0

Test Method: SWAB Casing PSI: 0 Tubing PSI: 0 Choke Size: 0

Gas Disposition: Gas Type: Btu Gas: 0 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 4914 Tbg setting date: 04/09/2014 Packer Depth: 4493

Reason for Non-Production: wet

Date formation Abandoned: 04/10/2014 Squeeze:  Yes  No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 4545 \*\* 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: Randy Wheat

Title: Manager Date: Email randy@highplainsenergyllc.com

Attachment Check List

Table with columns Att Doc Num and Name

Total Attach: 0 Files

General Comments

Table with columns User Group, Comment, and Comment Date

Total: 0 comment(s)