

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:

401438252

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: 61250
2. Name of Operator: MULL DRILLING COMPANY INC
3. Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-
4. Contact Name: Mark Shreve
Phone: (316) 264-6366
Fax: (316) 264-6440
Email: mshreve@mulldrilling.com

5. API Number 05-073-06304-00
6. County: LINCOLN
7. Well Name: Meteor Unit
Well Number: 2
8. Location: QtrQtr: SESW Section: 9 Township: 12S Range: 52W Meridian: 6
9. Field Name: METEOR Field Code: 54750

Completed Interval

FORMATION: MORROW Status: SHUT IN Treatment Type:
Treatment Date: End Date: Date of First Production this formation: 06/30/2003
Perforations Top: 6746 Bottom: 6758 No. Holes: 64 Hole size: 52/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Added 2-7/8" x 5-1/2" Nickel-coated Arrowset 1-X Packer set at 6708'. Added 2-7/8" Sealtite tubing set at 6716'.

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: 2 + 7/8 Tubing Setting Depth: 6716 Tbg setting date: 10/09/2017 Packer Depth: 6708

Reason for Non-Production: In process of converting well to injection well.

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: Risa Carter

Title: Production Tech. Date: _____ Email: rcarter@mulldrilling.com
:

Attachment Check List

Att Doc Num **Name**

401439686	WELLBORE DIAGRAM
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Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)