

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



Table with columns DE, ET, OE, ES

Document Number: 401451553

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: 96850
2. Name of Operator: TEP ROCKY MOUNTAIN LLC
3. Address: PO BOX 370 City: PARACHUTE State: CO Zip: 81635
4. Contact Name: Kellye Garcia Phone: (832) 726-1159 Fax: Email: kgarcia@terraep.com

5. API Number 05-045-23476-00
6. County: GARFIELD
7. Well Name: CHEVRON Well Number: TR 24-23-597
8. Location: QtrQtr: SWNE Section: 23 Township: 5S Range: 97W Meridian: 6
9. Field Name: TRAIL RIDGE Field Code: 83825

Completed Interval

FORMATION: COZZETTE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/18/2017 End Date: 09/26/2017 Date of First Production this formation: 10/25/2017

Perforations Top: 10028 Bottom: 10224 No. Holes: 30 Hole size: 35/100

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

11411 bbls of slickwater; No Proppant; 282 gals of biocide

This formation is commingled with another formation: [ ] Yes [X] No

Total fluid used in treatment (bbl): 11418 Max pressure during treatment (psi): 7175
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.43
Type of gas used in treatment: Min frac gradient (psi/ft): 0.51
Total acid used in treatment (bbl): Number of staged intervals: 2
Recycled water used in treatment (bbl): 11411 Flowback volume recovered (bbl): 1600
Fresh water used in treatment (bbl): Disposition method for flowback: RECYCLE
Total proppant used (lbs): Rule 805 green completion techniques were utilized: [X]

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: CORCORAN Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/18/2017 End Date: 09/26/2017 Date of First Production this formation: 10/25/2017

Perforations Top: 10245 Bottom: 10402 No. Holes: 18 Hole size: 35/100

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

8069 bbls of slickwater; No Proppant; 170 gals of biocide

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 8073 Max pressure during treatment (psi): 7175

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 0.51

Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: 1

Recycled water used in treatment (bbl): 8069 Flowback volume recovered (bbl): 960

Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: RECYCLE

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: WILLIAMS FORK-CAMEO-COZZETTE-CORCORAN Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/18/2017 End Date: 09/26/2017 Date of First Production this formation: 10/25/2017  
Perforations Top: 7737 Bottom: 10402 No. Holes: 288 Hole size: 35/100

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

113660 bbls of slickwater; No Proppant; 2564 gals of biocide

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 113721 Max pressure during treatment (psi): 7175

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: Min frac gradient (psi/ft): 0.51

Total acid used in treatment (bbl): Number of staged intervals: 12

Recycled water used in treatment (bbl): 113660 Flowback volume recovered (bbl): 46069

Fresh water used in treatment (bbl): Disposition method for flowback: RECYCLE

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: 10/25/2017 Hours: 24 Bbl oil: 0 Mcf Gas: 2000 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 2000 Bbl H2O: 0 GOR: 0

Test Method: FLOWING Casing PSI: 2171 Tubing PSI: 1490 Choke Size: 23/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1066 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 10124 Tbg setting date: 09/30/2017 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: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 09/18/2017 End Date: 09/26/2017 Date of First Production this formation: 10/25/2017

Perforations Top: 7737 Bottom: 9751 No. Holes: 240 Hole size: 35/100

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

94180 bbls of slickwater; No Proppant; 2113 gals of biocide

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 94230 Max pressure during treatment (psi): 7175

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: Min frac gradient (psi/ft): 0.51

Total acid used in treatment (bbl): Number of staged intervals: 10

Recycled water used in treatment (bbl): 94180 Flowback volume recovered (bbl): 43520

Fresh water used in treatment (bbl): Disposition method for flowback: RECYCLE

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.

Comment: All flowback volumes are estimates based on commingled volume.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete. Signed: Print Name: Kellye Garcia Title: Land & Regulatory Tech Date: Email kgarcia@terraep.com

Attachment Check List

Table with 2 columns: Att Doc Num, Name. Row 1: 401451557, WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

Table with 3 columns: User Group, Comment, Comment Date. Row 1: Stamp Upon Approval

Total: 0 comment(s)