

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 401442650

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: 10456
2. Name of Operator: CAERUS PICEANCE LLC
3. Address: 1001 17TH STREET #1600
City: DENVER State: CO Zip: 80202
4. Contact Name: Kyle Davis
Phone: (720) 8806375
Fax:
Email: kdavis@caerusoilandgas.com

5. API Number 05-045-23370-00
6. County: GARFIELD
7. Well Name: Puckett
Well Number: 33A-26-697
8. Location: QtrQtr: NWNE Section: 26 Township: 6S Range: 97W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: MESAVERDE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/29/2017 End Date: 09/01/2017 Date of First Production this formation: 09/11/2017

Perforations Top: 7206 Bottom: 8970 No. Holes: 189 Hole size: 0.37

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

Frac'd with 56,124 bbls slickwater and 163 bbls 7.5% HCl acid.

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

Total fluid used in treatment (bbl): 56124 Max pressure during treatment (psi): 8400

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.40

Type of gas used in treatment: Min frac gradient (psi/ft): 0.49

Total acid used in treatment (bbl): 163 Number of staged intervals: 7

Recycled water used in treatment (bbl): 56124 Flowback volume recovered (bbl): 20954

Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 0 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: 09/11/2017 Hours: 24 Bbl oil: 0 Mcf Gas: 216 Bbl H2O: 1086

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 216 Bbl H2O: 1086 GOR: 0

Test Method: Flowing Casing PSI: 170 Tubing PSI: 2400 Choke Size: 48

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1060 API Gravity Oil:

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8710 Tbg setting date: 09/14/2017 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.

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: Garrett Elsener

Title: Completions Engineer Lead Date: _____ Email: garrett@caerusoilandgas.com
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Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)