

FORM
5ARev
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:

401514034

Date Received:

01/18/2018

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: 10112
 2. Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC
 3. Address: 5057 KELLER SPRINGS RD STE 650
 City: ADDISON State: TX Zip: 75001
 4. Contact Name: Adam Johnson
 Phone: (918) 526-5505
 Fax: (918) 585-1660
 Email: regulatory@foundationenergy.com

5. API Number 05-125-06102-00
 6. County: YUMA
 7. Well Name: WHOMBLE
 Well Number: 1-6
 8. Location: QtrQtr: SWNE Section: 6 Township: 3S Range: 43W Meridian: 6
 9. Field Name: BEECHER ISLAND Field Code: 5997

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
 Treatment Date: 12/15/2017 End Date: 12/15/2017 Date of First Production this formation: 12/03/1977
 Perforations Top: 1610 Bottom: 1640 No. Holes: 18 Hole size: 21/50

Provide a brief summary of the formation treatment:

Open Hole: ☐

Re-frac'd well with 99,580 lbs of 16/30 sand, 500 gal of 7.5% HCl acid, 500,000 scf of nitrogen, 475 bbls of water

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

Total fluid used in treatment (bbl): 487

Max pressure during treatment (psi): 1060

Total gas used in treatment (mcf): 500

Fluid density at initial fracture (lbs/gal): 2.50

Type of gas used in treatment: NITROGEN

Min frac gradient (psi/ft): 0.75

Total acid used in treatment (bbl): 12

Number of staged intervals: 1

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 50

Fresh water used in treatment (bbl): 475

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 99580

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized: PRESSURE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/22/2017 Hours: 24 Bbl oil: 0 Mcf Gas: 52 Bbl H2O: 33
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 52 Bbl H2O: 33 GOR:
 Test Method: Flowing Casing PSI: 67 Tubing PSI: Choke Size: 1/4
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1000 API Gravity Oil: 0
 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:

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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: Rachel Grant

Title: HSE/Regulatory Manager Date: 1/18/2018 Email regulatory@foundationenergy.com
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Attachment Check List

Att Doc Num **Name**

401514034	FORM 5A SUBMITTED
401519126	NET PRESSURE CHART
401519127	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)