

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 10447 2. Name of Operator: URSA OPERATING COMPANY LLC 3. Address: 1600 BROADWAY ST STE 2600 City: DENVER State: CO Zip: 80202 4. Contact Name: CARI MASCIOLI Phone: (970) 284-3244 Fax: Email: cmascioli@ursaresources.com

5. API Number 05-045-23319-00 6. County: GARFIELD 7. Well Name: BMC B Well Number: 14A-18-07-95 8. Location: QtrQtr: SWNW Section: 18 Township: 7S Range: 95W Meridian: 6 9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/14/2018 End Date: 02/23/2018 Date of First Production this formation: 03/16/2018 Perforations Top: 3433 Bottom: 6271 No. Holes: 540 Hole size: 0.37

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

Frac'd with 151,152 bbls 2% KCL slickwater and no proppant. Frac pair with BMC B 23D-18-07-95 (API #05-045-23318).

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

Total fluid used in treatment (bbl): 151152 Max pressure during treatment (psi): 7729 Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.40 Type of gas used in treatment: Min frac gradient (psi/ft): 0.71 Total acid used in treatment (bbl): Number of staged intervals: 10 Recycled water used in treatment (bbl): 151152 Flowback volume recovered (bbl): 23051 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: 03/27/2018 Hours: 24 Bbl oil: 0 Mcf Gas: 1225 Bbl H2O: 1162 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1225 Bbl H2O: 1162 GOR: 0 Test Method: Flowing Casing PSI: 350 Tubing PSI: 1200 Choke Size: 64/64 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1068 API Gravity Oil: 0 Tubing Size: 2 + 3/8 Tubing Setting Depth: 4867 Tbg setting date: 03/17/2018 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:

WELLBORE DIAGRAM ATTACHED. PLEASE NOTE, THE TPZ FOOTAGES INCLUDED WITH THE ASSOCIATED FORM 5 SUBMITTAL WERE PLANNED FOOTAGES AS THE WELL HAD NOT YET BEEN COMPLETED. AS-DRILLED TPZ FOOTAGES ARE AS FOLLOWS:

1494' FSL, 610' FWL, SECTION 18-T7S-R95W

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: CARI MASCIOLI

Title: REGULATORY ANALYST Date: 4/10/2018 Email: cmascioli@ursaresources.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401387470	FORM 5A SUBMITTED
401602352	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)