

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:

401760957

Date Received:

11/05/2018

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: 10459 4. Contact Name: Elaine Winick
 2. Name of Operator: EXTRACTION OIL & GAS INC Phone: (970) 576-3461
 3. Address: 370 17TH STREET SUITE 5300 Fax: (970) 534-6001
 City: DENVER State: CO Zip: 80202 Email: ewinick@extractionog.com

5. API Number 05-123-45709-00 6. County: WELD
 7. Well Name: Trott Well Number: 8E-10-3N
 8. Location: QtrQtr: NESE Section: 7 Township: 4N Range: 68W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATIONTreatment Date: 06/24/2018 End Date: 06/30/2018 Date of First Production this formation: 10/08/2018Perforations Top: 6164 Bottom: 10495 No. Holes: 526 Hole size: 41/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac'd Niobrara with 23-stage plug-and-perf;
 5387 total bbls fluid pumped: 5205 bbls fresh water and 182 bbls 15% HCL acid;
 8280564 total lbs proppant pumped: 4140120 lbs 40/70 mesh and 4140444 lbs 30/50 mesh.

This formation is commingled with another formation: ☐ Yes ☒ NoTotal fluid used in treatment (bbl): 5387Max pressure during treatment (psi): 8322

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.79Total acid used in treatment (bbl): 182Number of staged intervals: 23

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): 3131Fresh water used in treatment (bbl): 5205Disposition method for flowback: DISPOSALTotal proppant used (lbs): 8280564Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/19/2018 Hours: 24 Bbl oil: 320 Mcf Gas: 112 Bbl H2O: 180
 Calculated 24 hour rate: Bbl oil: 320 Mcf Gas: 112 Bbl H2O: 180 GOR: 350
 Test Method: flowing Casing PSI: 0 Tubing PSI: 427 Choke Size: 20/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1315 API Gravity Oil: 40
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 6035 Tbg setting date: 08/12/2018 Packer Depth: 6020

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:

TPZ: 2428 FNL & 505 FWL

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

Signed: _____ Print Name: Elaine Winick

Title: Completions Tech Date: 11/5/2018 Email : ewinick@extractionog.com

Attachment Check List

Att Doc Num **Name**

401760957	FORM 5A SUBMITTED
401817913	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)