

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



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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: 10433 4. Contact Name: Joan Proulx  
 2. Name of Operator: LARAMIE ENERGY LLC Phone: (970) 263-3641  
 3. Address: 1401 SEVENTEENTH STREET #1401 Fax: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202 Email: jproulx@laramie-energy.com

5. API Number 05-077-10516-00 6. County: MESA  
 7. Well Name: BCU Well Number: 0993-21-08E  
 8. Location: QtrQtr: SWNW Section: 21 Township: 9S Range: 93W Meridian: 6  
 9. Field Name: BUZZARD CREEK Field Code: 9500

Completed Interval

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

Treatment Date: 12/13/2018 End Date: 12/23/2018 Date of First Production this formation: 12/14/2018

Perforations Top: 6778 Bottom: 8298 No. Holes: 174 Hole size: 37/100

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

82,500 bbls slickwater; no proppant

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 82500 Max pressure during treatment (psi): 7514  
 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): 0.68  
 Total acid used in treatment (bbl): \_\_\_\_\_ Number of staged intervals: 6  
 Recycled water used in treatment (bbl): 82500 Flowback volume recovered (bbl): 34882  
 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: 01/02/2019 Hours: 1 Bbl oil: 0 Mcf Gas: 43 Bbl H2O: 15  
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1035 Bbl H2O: 369 GOR: 0  
 Test Method: Flowline Casing PSI: 2060 Tubing PSI: 1259 Choke Size: 20/64  
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1090 API Gravity Oil: 0  
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7920 Tbg setting date: 12/29/2018 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:

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

Signed: \_\_\_\_\_ Print Name: Joan Proulx

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: jproulx@laramie-energy.com  
:

### Attachment Check List

**Att Doc Num**      **Name**

|           |                  |
|-----------|------------------|
| 401915345 | WELLBORE DIAGRAM |
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**

**Comment Date**

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

Total: 0 comment(s)