

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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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: 96850
2. Name of Operator: TEP ROCKY MOUNTAIN LLC
3. Address: PO BOX 370 City: PARACHUTE State: CO Zip: 81635
4. Contact Name: Jeff Kirtland Phone: (970) 263-2736 Fax: Email: jkirtland@terraep.com

5. API Number 05-045-23901-00
6. County: GARFIELD
7. Well Name: CLOUGH Well Number: NR 14-3
8. Location: QtrQtr: NESW Section: 3 Township: 6S Range: 94W Meridian: 6
9. Field Name: RULISON Field Code: 75400

Completed Interval

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

Treatment Date: 01/23/2019 End Date: 01/28/2019 Date of First Production this formation: 03/19/2019
Perforations Top: 6543 Bottom: 9863 No. Holes: 309 Hole size: 35/100

Provide a brief summary of the formation treatment: Open Hole: []
177987 bbls of Slickwater; 3575000 100/Mesh; 3707 gals of Biocide; 2250 gals of Acid

This formation is commingled with another formation: [] Yes [X] No
Total fluid used in treatment (bbl): 178129 Max pressure during treatment (psi): 7834
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.43
Type of gas used in treatment: Min frac gradient (psi/ft): 0.69
Total acid used in treatment (bbl): 54 Number of staged intervals: 13
Recycled water used in treatment (bbl): 177987 Flowback volume recovered (bbl): 46169
Fresh water used in treatment (bbl): 88 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 3575000 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: 03/19/2019 Hours: 24 Bbl oil: 0 Mcf Gas: 3351 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 3351 Bbl H2O: 0 GOR: 0
Test Method: FLOWING Casing PSI: 2390 Tubing PSI: 2247 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1124 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 9531 Tbg setting date: 02/13/2019 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: Ashley Noonan

Title: Sr. Regulatory Analyst Date: _____ Email: anoonan@terraep.com
:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401981392	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)