

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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Document Number:

401962146

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: 10447
2. Name of Operator: URSA OPERATING COMPANY LLC
3. Address: 950 17TH STREET, SUITE 1900
City: DENVER State: CO Zip: 80202
4. Contact Name: CARI MASCIOLI
Phone: (970) 284-3244
Fax: _____
Email: cmascioli@ursaresources.com

5. API Number 05-103-12339-00
6. County: RIO BLANCO
7. Well Name: Boies Ranch C-240 FED
Well Number: 31C-25-02-98
8. Location: QtrQtr: SESE Section: 24 Township: 2s Range: 98w Meridian: 6
9. Field Name: SULPHUR CREEK Field Code: 80090

Completed Interval

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

Treatment Date: 02/24/2019 End Date: 04/04/2019 Date of First Production this formation: 04/24/2019

Perforations Top: 6502 Bottom: 10496 No. Holes: 756 Hole size: 37/100

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

Frac'd with 25,960 bbls fresh water, 233,651 bbls 2% KCl slickwater and no proppant. Frac pair with Boies Ranch C-240 FED 21B-25-02-98 (API #05-103-12336).

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

Total fluid used in treatment (bbl): 259611 Max pressure during treatment (psi): 8249

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: 14

Recycled water used in treatment (bbl): 233651 Flowback volume recovered (bbl): 21765

Fresh water used in treatment (bbl): 25960 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: 05/01/2019 Hours: 24 Bbl oil: 0 Mcf Gas: 1875 Bbl H2O: 3310

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1875 Bbl H2O: 3310 GOR: 0

Test Method: Flowing Casing PSI: 900 Tubing PSI: 3000 Choke Size: 48/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1068 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8505 Tbg setting date: 04/24/2019 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:

THE WELLS ON THE BOIES RANCH C-240 PAD ARE CURRENTLY BEING COMPLETED.

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:

716' FNL, 2030' FEL, SECTION 25-T2S-R98W

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: _____ Email : cmascioli@ursaresources.com

Attachment Check List

Att Doc Num Name

| | |
|-----------|------------------|
| 402027907 | WELLBORE DIAGRAM |
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Total Attach: 1 Files

General Comments

User Group Comment

Comment Date

| | | |
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| | | Stamp Upon Approval |
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Total: 0 comment(s)