

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		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
			Document Number: <p style="text-align: center;">402244650</p> 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: <u>26580</u>	4. Contact Name: <u>LARRY SMITH</u>
2. Name of Operator: <u>BURLINGTON RESOURCES OIL & GAS LP</u>	Phone: <u>(832) 4862590</u>
3. Address: <u>925 N ELDRIDGE PARKWAY</u>	Fax: _____
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77079</u>	Email: <u>larry.r.smith@conocophillips.com</u>

5. API Number <u>05-005-07382-00</u>	6. County: <u>ARAPAHOE</u>
7. Well Name: <u>Prosper Farms 4-65 11-12</u>	Well Number: <u>3CH</u>
8. Location: QtrQtr: <u>NWSW</u> Section: <u>11</u> Township: <u>4S</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WILDCAT</u>	Field Code: <u>99999</u>

Completed Interval

FORMATION: <u>NIOBRARA</u>	Status: <u>PRODUCING</u>	Treatment Type: <u>FRACTURE STIMULATION</u>
Treatment Date: <u>07/24/2019</u>	End Date: <u>08/14/2019</u>	Date of First Production this formation: _____
Perforations Top: <u>8475</u>	Bottom: <u>17767</u>	No. Holes: <u>266</u> Hole size: <u>0.38</u>
Provide a brief summary of the formation treatment: _____		
Open Hole: <input type="checkbox"/>		
1928 bbls 15% HCl Acid; 314 bbls Fresh Water; 6180 bbls Wireline Pump In; 119397 bbls FR Water; 38590 bbls HVFR; 644449 lbs 100 Mesh; 5824740 lbs 40/70 white.		

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): <u>166409</u>	Max pressure during treatment (psi): <u>9148</u>
Total gas used in treatment (mcf): _____	Fluid density at initial fracture (lbs/gal): <u>8.33</u>
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.91</u>
Total acid used in treatment (bbl): <u>1928</u>	Number of staged intervals: <u>27</u>
Recycled water used in treatment (bbl): _____	Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): <u>119397</u>	Disposition method for flowback: <u>DISPOSAL</u>
Total proppant used (lbs): <u>6469189</u>	Rule 805 green completion techniques were utilized: <input checked="" type="checkbox"/>

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: <u>11/06/2019</u>	Hours: <u>24</u>	Bbl oil: <u>1126</u>	Mcf Gas: <u>1137</u>	Bbl H2O: <u>384</u>
Calculated 24 hour rate:	Bbl oil: <u>1126</u>	Mcf Gas: <u>1137</u>	Bbl H2O: <u>384</u>	GOR: <u>1009</u>
Test Method: <u>FLOWING</u>	Casing PSI: <u>1</u>	Tubing PSI: <u>959</u>	Choke Size: <u>27/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>WET</u>	Btu Gas: <u>0</u>	API Gravity Oil: <u>39</u>	
Tubing Size: <u>2 + 7/8</u>	Tubing Setting Depth: <u>7770</u>	Tbg setting date: <u>09/21/2019</u>	Packer Depth: <u>7520</u>	

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:

Waiting on Gas Analysis: "Gas analysis pending – will file BTU Gas via Sundry as soon as Gas Analysis complete.

(If new): "Form 5 for this well was RESUBMITTED on 10/21/2019, DOC ID 402211061. As-completed plat attached to certify productive interval meets setback conditions."

As per form 2 COA stating: In the Operator Comments on the Form 5A the operator will:

- (1) report the footages from the section lines of the bottom of the completed interval - 1866 FROM AOUTH, 467 FROM EAST.
- (2) Describe how the wellbore beyond the unit boundary setback is physically isolated: Pressure tested casing for TIV. Pressured to 9800 PSI TIV did not open and held for 30 minutes. This confirms and certifies proper isolation of setback with no part of the setback being completed.
- (3) certify that none of the wellbore setback was completed. Statement above certifies setback isolation.

** NOTE submitting this form to remain in compliance with due date as described by COGCC rules. Do not yet have a Date of 1st Production, expect to have after or during the Holiday. This well expected to go to permanent facilities between 12/06 & 12/08. Will resubmit a Form 5a with that data once received if needed ** Discussed this option with Eden. Will follow-up with email notice to Eden on Document numbers to hold off processing, Thank You!! ***

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

Signed: _____ Print Name: Larry Smith
 Title: Sr. Reg. Coord. Date: _____ Email larry.r.smith@conocophillips.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402244654	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)