

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: 26580 4. Contact Name: Larry Smith
2. Name of Operator: BURLINGTON RESOURCES OIL & GAS LP Phone: (832) 4862590
3. Address: 925 N ELDRIDGE PARKWAY City: HOUSTON State: TX Zip: 77079 Fax: Email: larry.r.smith@conocophillips.com

5. API Number 05-005-07381-00 6. County: ARAPAHOE
7. Well Name: Prosper Farms 4-65 11-12 Well Number: 3DH
8. Location: QtrQtr: NWSW Section: 11 Township: 4S Range: 65W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/21/2019 End Date: 08/14/2019 Date of First Production this formation:
Perforations Top: 8565 Bottom: 17861 No. Holes: 266 Hole size: 0.38

Provide a brief summary of the formation treatment: Open Hole:
2042 bbls 15% HCl Acid; 488 bbls Fresh Water; 6492 bbls Wireline Pump In; 100271 bbls FR Water; 67362 bbls HVFR Water; 651499lbs 100 Mesh; 6009987 lbs 40/70 White.

This formation is commingled with another formation: Yes No
Total fluid used in treatment (bbl): 176655 Max pressure during treatment (psi): 9238
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): 0.81
Total acid used in treatment (bbl): 2042 Number of staged intervals: 27
Recycled water used in treatment (bbl): Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): 100271 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 6661486 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: 11/06/2019 Hours: 24 Bbl oil: 1001 Mcf Gas: 988 Bbl H2O: 510
Calculated 24 hour rate: Bbl oil: 1001 Mcf Gas: 988 Bbl H2O: 510 GOR: 987
Test Method: FLOWING Casing PSI: 8 Tubing PSI: 880 Choke Size: 26/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 0 API Gravity Oil: 39
Tubing Size: 2 + 7/8 Tubing Setting Depth: 7840 Tbg setting date: 09/27/2019 Packer Depth: 7557

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 submitted on 10/23/2019, DOC ID 402210843. 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 - 1543 FROM SOUTH, 498 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>
402244702	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)