

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 05-045-24029-00
6. County: GARFIELD
7. Well Name: FEDERAL Well Number: RWF 43-7
8. Location: QtrQtr: LOT 4 Section: 17 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: 09/06/2019 End Date: 09/14/2019 Date of First Production this formation: 10/30/2019
Perforations Top: 6931 Bottom: 9576 No. Holes: 315 Hole size: 35/100

Provide a brief summary of the formation treatment: Open Hole: []
186018 bbls of Slickwater; 1831740 100/Mesh; 5709 gals of biocide

This formation is commingled with another formation: [] Yes [X] No
Total fluid used in treatment (bbl): 186154 Max pressure during treatment (psi): 8291
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): 0.72
Total acid used in treatment (bbl): 0 Number of staged intervals: 15
Recycled water used in treatment (bbl): 186018 Flowback volume recovered (bbl): 25476
Fresh water used in treatment (bbl): 136 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 1831740 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: 10/30/2019 Hours: 24 Bbl oil: 0 Mcf Gas: 2077 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 2077 Bbl H2O: 0 GOR:
Test Method: Flowing Casing PSI: 2004 Tubing PSI: 1825 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1078 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 9225 Tbg setting date: 09/18/2019 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
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Attachment Check List

Att Doc Num **Name**

402240288	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)