

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: 402053033 Date Received: 05/30/2019				
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>96850</u> 2. Name of Operator: <u>TEP ROCKY MOUNTAIN LLC</u> 3. Address: <u>PO BOX 370</u> City: <u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>	4. Contact Name: <u>Jeff Kirtland</u> Phone: <u>(970) 263-2736</u> Fax: _____ Email: <u>jkirtland@terraep.com</u>
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5. API Number <u>05-045-24142-00</u> 7. Well Name: <u>FEDERAL</u> 8. Location: QtrQtr: <u>NWNW</u> Section: <u>22</u> Township: <u>7S</u> 9. Field Name: <u>GRAND VALLEY</u> Field Code: <u>31290</u>	6. County: <u>GARFIELD</u> Well Number: <u>SG 311-22</u> Range: <u>96W</u> Meridian: <u>6</u>
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Completed Interval

FORMATION: <u>WILLIAMS FORK - CAMEO</u>	Status: <u>PRODUCING</u>	Treatment Type: <u>FRACTURE STIMULATION</u>
Treatment Date: <u>03/26/2019</u>	End Date: <u>03/28/2019</u>	Date of First Production this formation: <u>04/30/2019</u>
Perforations Top: <u>4603</u>	Bottom: <u>6019</u>	No. Holes: <u>168</u> Hole size: <u>35/100</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>
48126 bbls of Slickwater; 1469 gals of Biocide		
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total fluid used in treatment (bbl): <u>48161</u>	Max pressure during treatment (psi): <u>7036</u>	
Total gas used in treatment (mcf): _____	Fluid density at initial fracture (lbs/gal): <u>8.43</u>	
Type of gas used in treatment: _____	Min frac gradient (psi/ft): <u>0.63</u>	
Total acid used in treatment (bbl): <u>0</u>	Number of staged intervals: <u>8</u>	
Recycled water used in treatment (bbl): <u>48126</u>	Flowback volume recovered (bbl): <u>26409</u>	
Fresh water used in treatment (bbl): <u>35</u>	Disposition method for flowback: <u>RECYCLE</u>	
Total proppant used (lbs): <u>0</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>05/02/2019</u>	Hours: <u>24</u>	Bbl oil: <u>0</u>	Mcf Gas: <u>6095</u>	Bbl H2O: <u>0</u>
Calculated 24 hour rate:	Bbl oil: <u>0</u>	Mcf Gas: <u>6095</u>	Bbl H2O: <u>0</u>	GOR: <u>0</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>1382</u>	Tubing PSI: <u>1160</u>	Choke Size: <u>32/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	Btu Gas: <u>1076</u>	API Gravity Oil: <u>0</u>	
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>5879</u>	Tbg setting date: <u>04/07/2019</u>	Packer Depth: _____	
Reason for Non-Production: 				
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____				
** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.				

Comment:

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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: 5/30/2019 Email: anoonan@terraep.com
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402053033	FORM 5A SUBMITTED
402059816	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passed Completion review.	01/06/2020

Total: 1 comment(s)