

FORM
5ARev
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



DE ET OE ES

Document Number:

402368353

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: 61250
 2. Name of Operator: MULL DRILLING COMPANY INC
 3. Address: 1700 N WATERFRONT PKWY B#1200
 City: WICHITA State: KS Zip: 67206-
 4. Contact Name: Mark Shreve
 Phone: (316) 264-6366
 Fax: (316) 264-6440
 Email: mshreve@mulldrilling.com

5. API Number 05-017-06871-00
 6. County: CHEYENNE
 7. Well Name: NW ARAPAHOE UT
 Well Number: 15
 8. Location: QtrQtr: SWSW Section: 32 Township: 13S Range: 42W Meridian: 6
 9. Field Name: ARAPAHOE Field Code: 2875

Completed Interval

FORMATION: MORROW Status: PRODUCING Treatment Type:
 Treatment Date: End Date: Date of First Production this formation: 10/18/1989
 Perforations Top: 5274 Bottom: 5288 No. Holes: 34 Hole size: 52/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Drilled out existing CIBP that was located at 5283' to change producing interval from 5274'-5278' to 5274'-5288'. Overall perforated interval for the Morrow formation is down to 5332', but perforations at 5328'-5332' are temporarily abandoned with a CIBP at 5318'.

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

Total fluid used in treatment (bbl):

Max pressure during treatment (psi):

Total gas used in treatment (mcf):

Fluid density at initial fracture (lbs/gal):

Type of gas used in treatment:

Min frac gradient (psi/ft):

Total acid used in treatment (bbl):

Number of staged intervals:

Recycled water used in treatment (bbl):

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback:

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: Hours: Bbl oil: Mcf Gas: Bbl H2O:
 Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:
 Test Method: Casing PSI: Tubing PSI: Choke Size:
 Gas Disposition: Gas Type: Btu Gas: API Gravity Oil:
 Tubing Size: 2 + 7/8 Tubing Setting Depth: 5289 Tbg setting date: 03/06/2020 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: Risa Carter

Title: Prod. Tech. _____ Date: _____ Email: rcarter@mulldrilling.com
:

Attachment Check List

Att Doc Num **Name**

402368354	WELLBORE DIAGRAM
-----------	------------------

Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)