

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



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Document Number:  
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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: <u>69175</u>	4. Contact Name: <u>Cassie Gonzalez</u>
2. Name of Operator: <u>PDC ENERGY INC</u>	Phone: <u>(303) 860-5800</u>
3. Address: <u>1775 SHERMAN STREET - STE 3000</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: <u>Cassie.Gonzalez@pdce.com</u>

5. API Number <u>05-123-46838-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Lory</u>	Well Number: <u>9N</u>
8. Location: QtrQtr: <u>SWSE</u> Section: <u>33</u> Township: <u>4N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/24/2020 End Date: 02/14/2020 Date of First Production this formation: 03/31/2020  
Perforations Top: 7312 Bottom: 17227 No. Holes: 1320 Hole size: 42/100

Provide a brief summary of the formation treatment: Open Hole:

56 Stage Plug and Perf  
Total Fluid: 103,709 bbls  
Slickwater Fluid: 102,403 bbls  
15% HCl Acid: 1,306 bbls  
Total Proppant: 10,990,189 lbs  
Silica Proppant: 10,990,189 lbs  
Method for determining flowback: measuring flowback tank volumes.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 103709	Max pressure during treatment (psi): 4512
Total gas used in treatment (mcf):	Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment:	Min frac gradient (psi/ft): 0.94
Total acid used in treatment (bbl): 1306	Number of staged intervals: 56
Recycled water used in treatment (bbl):	Flowback volume recovered (bbl): 9207
Fresh water used in treatment (bbl): 102403	Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 10990189	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: 04/07/2020	Hours: 24	Bbl oil: 263	Mcf Gas: 2927	Bbl H2O: 93
Calculated 24 hour rate:	Bbl oil: 263	Mcf Gas: 2927	Bbl H2O: 93	GOR: 11129
Test Method: Flowing	Casing PSI: 2877	Tubing PSI: 2606	Choke Size: 16/64	
Gas Disposition: SOLD	Gas Type: WET	Btu Gas: 1340	API Gravity Oil: 49	
Tubing Size: 2 + 3/8	Tubing Setting Depth: 7166	Tbg setting date: 03/21/2020	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:  
Actual Top of Productive Zone Footage: 546' FSL & 1,066' FEL Sec: 33 Twp: 4N Rng: 65W

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.  
Signed: \_\_\_\_\_ Print Name: Cassie Gonzalez  
Title: Regulatory Analyst Date: \_\_\_\_\_ Email: Cassie.Gonzalez@pdce.com

## Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Stamp Upon  
Approval

Total: 0 comment(s)