

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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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: 10456 4. Contact Name: Cole Spurgeon  
 2. Name of Operator: CAERUS PICEANCE LLC Phone: (303) 565-4600  
 3. Address: 1001 17TH STREET #1600 Fax: (303) 565-4606  
 City: DENVER State: CO Zip: 80202 Email: cspurgeon@caerusoilandgas.com

5. API Number 05-045-14158-00 6. County: GARFIELD  
 7. Well Name: G. JONES Well Number: 35-44A  
 8. Location: QtrQtr: SESE Section: 35 Township: 7S Range: 96W Meridian: 6  
 9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: COZZETTE Status: ABANDONED WELLBORE/COMPLETION Treatment Type: \_\_\_\_\_  
 Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: 04/01/2008  
 Perforations Top: 5960 Bottom: 5989 No. Holes: 9 Hole size: 34/100  
 Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:   
 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: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ Packer Depth: \_\_\_\_\_

Reason for Non-Production: High Water Production

Date formation Abandoned: 03/06/2018 Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

\*\* Bridge Plug Depth: 5750 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

FORMATION: CORCORAN Status: ABANDONED WELLBORE/COMPLETION Treatment Type: \_\_\_\_\_

Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: 04/01/2008

Perforations Top: 6066 Bottom: 6102 No. Holes: 15 Hole size: 34/100

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

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: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ Packer Depth: \_\_\_\_\_

Reason for Non-Production: High Water Production

Date formation Abandoned: 03/06/2018 Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

\*\* Bridge Plug Depth: 5750 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

Comment: \_\_\_\_\_  
Caerus does not plan to re-enter the lles (Cozzette or Corcoran).

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Cole Spurgeon

Title: Production Engineer Date: 3/22/2018 Email: cspurgeon@caerusoilandgas.com

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
2349910	WIRELINE JOB SUMMARY
2349911	OPERATIONS SUMMARY
401582152	FORM 5A SUBMITTED

Total Attach: 3 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	• Missing Wireline and Cement Job Summaries; wireline summary uploaded as doc 02349910; operations summary uploaded as doc 02349911.	04/30/2020

Total: 1 comment(s)