

Document Number:
401453089

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: 96155 4. Contact Name: Pauleen Tobin
 2. Name of Operator: WHITING OIL & GAS CORPORATION Phone: (303) 837-1661
 3. Address: 1700 LINCOLN STREET SUITE 4700 Fax: _____
 City: DENVER State: CO Zip: 80290 Email: pollyt@whiting.com

5. API Number 05-123-41446-00 6. County: WELD
 7. Well Name: Horsetail Well Number: 08D-1735
 8. Location: QtrQtr: NWNW Section: 8 Township: 10N Range: 57W Meridian: 6
 9. Field Name: DJ HORIZONTAL CARL-CODL- Field Code: 16946

Completed Interval

FORMATION: CARLILE Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: _____
 Perforations Top: 6597 Bottom: 12351 No. Holes: 90 Hole size: 3/8

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

Completed Depths: 6597'-6852' (80 shots); 12350'-12352' (10 shots)

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: _____

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.

FORMATION: CARLILE-CODELL-FORT HAYS Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/21/2017 End Date: 06/30/2017 Date of First Production this formation: 08/26/2017

Perforations Top: 6454 Bottom: 16195 No. Holes: 2601 Hole size: 3/8

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

65 Stage Plug & Perf, 1201287 lbs 100 Mesh , 5016486lbs 30/50 Prem White sand, 762 bbls 15% HCl, 261057 bbls slickwater

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 261819 Max pressure during treatment (psi): 7520

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.80

Total acid used in treatment (bbl): 762 Number of staged intervals: 65

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 18152

Fresh water used in treatment (bbl): 261057 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 6217773 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 09/12/2017 Hours: 24 Bbl oil: 128 Mcf Gas: 99 Bbl H2O: 459

Calculated 24 hour rate: Bbl oil: 128 Mcf Gas: 99 Bbl H2O: 459 GOR: 773

Test Method: Separator Casing PSI: 0 Tubing PSI: 400 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1440 API Gravity Oil: 36

Tubing Size: 3 Tubing Setting Depth: 6039 Tbg setting date: 08/20/2017 Packer Depth: 6029

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.

FORMATION: CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: _____

Perforations Top: 6454 Bottom: 16046 No. Holes: 2250 Hole size: 3/8

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

Completed Depths: 6454'-6536' (40 shots); 6893'-8482' (440 shots); 8817'-9152' (100 shots); 9210'-12152' (790 shots); 12380'-12687' (90 shots); 12798'-13857' (290 shots); 14175'-16046' (500 shots)

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: _____

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.

FORMATION: FORT HAYS Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: _____

Perforations Top: 8521 Bottom: 16195 No. Holes: 261 Hole size: 3/8

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

Completed Depths: 8521'-8754' (80 shots); 9180'-9182' (10 shots); 12170'-12309' (40 shots); 12722'-12762' (20 shots); 13893'-14159' (80 shots); 16094'-16195' (31 shots)

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: _____

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:

Top of producing zone corrected to 743 FNL 790 FWL based on top perforation at 6454'.
Replace pound signs in frac description with pound abbreviation
Updated choke to 16/64, Casing PSI to 0.
Updated shot size to 3/8
COGCC shows produced 2 days in August. Update Date of First Production to 8/30/2017.
Updated field to DJ HORIZONTAL-CARL-CODL-FT HAYES
Submitted Form 4 to add Carlile and Fort Hays Formations. Found Order 535-658 which added Codell. Order updated 535-745
Changed open hole completion tab on the Codell formation tab from yes to no as per comments
Changed formation status from commingled to producing for the Carlile, Codell, and Fort Hayes formation tabs per comments
Changed formation status of the Carlile-Codell-Fort Hayes formation tab to from producing to commingled

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

Signed: _____ Print Name: Pauleen Tobin

Title: Engineer Tech Date: _____ Email pollyt@whiting.com

Attachment Check List

Att Doc Num	Name
401453709	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Returned to DRAFT for review and repair per agreement with operator. Deficiencies previously acknowledged in prior requests.	06/30/2020
Permit	Corrected field name. Formation was permitted for the Niobrara, but completed in the Carlile, Codell, and Fort Hayes.	02/27/2020
Permit	Changed open hole completion tab on the Codell formation tab from yes to no as per documents Changed formation status from commingled to producing for the Carlile, Codell, and Fort Hayes formation tabs Changed formation status of the Carlile-Codell-Fort Hayes formation tab to from producing to commingled	06/06/2018

Total: 3 comment(s)