

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



DE	ET	OE	ES
----	----	----	----

Document Number:

402393176

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: 10459
2. Name of Operator: EXTRACTION OIL & GAS INC
3. Address: 370 17TH STREET SUITE 5300
City: DENVER State: CO Zip: 80202
4. Contact Name: Elaine Winick
Phone: (970) 576-3461
Fax: (970) 534-6001
Email: ewinick@extractionog.com

5. API Number 05-123-45038-00
6. County: WELD
7. Well Name: AD FED J EVANS
Well Number: 20W-25-5
8. Location: QtrQtr: NWSW Section: 21 Township: 5N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION
Treatment Date: 04/03/2020 End Date: 04/17/2020 Date of First Production this formation: 07/25/2020
Perforations Top: 8430 Bottom: 19666 No. Holes: 516 Hole size: 40/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

8430 - 11308; 12001 - 12375; 13705 - 13824; 14370 - 14978; 15467 - 16162; 16275 - 16320; 17130 17894; 17923 - 18199; 19558 - 19666.

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: COMMINGLED		Treatment Type: FRACTURE STIMULATION	
Treatment Date: 04/03/2020		End Date: 04/17/2020		Date of First Production this formation: 07/25/2020	
Perforations	Top: 7519	Bottom: 19529	No. Holes: 343	Hole size: 40/100	
Provide a brief summary of the formation treatment:			Open Hole: <input type="checkbox"/>		
7519 - 8362; 11694 - 11944; 13343 - 13677; 13890 - 14345; 15006 - 15439; 16191 - 16250; 16681 - 17102; 17895; 18227 - 19050; 19224 - 19529.					
This formation is commingled with another formation:			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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: <input type="checkbox"/>			
Reason why green completion not utilized: _____					
Fracture stimulations must be reported on FracFocus.org					
<u>Test Information:</u>					
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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
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.			

FORMATION: NIOBRARA-FT HAYS-CODELL		Status: PRODUCING		Treatment Type: FRACTURE STIMULATION	
Treatment Date: 04/03/2020		End Date: 04/17/2020		Date of First Production this formation: 07/25/2020	
Perforations Top: 7519		Bottom: 19666		No. Holes: 994 Hole size: 40/100	
Provide a brief summary of the formation treatment:				Open Hole: <input type="checkbox"/>	
Frac'd Niobrara-Fort Hays-Codell with a 41 stage plug and perf: 8681415# 30/50 sand proppant pumped. 135196 total bbls fluid pumped: 117224 bbls gelled fluid; 17932 bbls fresh water and 40 bbls 28% HCl Acid.					
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Total fluid used in treatment (bbl): 135196		Max pressure during treatment (psi): 9637			
Total gas used in treatment (mcf): 0		Fluid density at initial fracture (lbs/gal): 8.30			
Type of gas used in treatment: _____		Min frac gradient (psi/ft): 0.96			
Total acid used in treatment (bbl): 40		Number of staged intervals: 41			
Recycled water used in treatment (bbl): 0		Flowback volume recovered (bbl): 15425			
Fresh water used in treatment (bbl): 17932		Disposition method for flowback: DISPOSAL			
Total proppant used (lbs): 8681415		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: 08/05/2020	Hours: 24	Bbl oil: 362	Mcf Gas: 2747	Bbl H2O: 52	
Calculated 24 hour rate:	Bbl oil: 362	Mcf Gas: 2747	Bbl H2O: 52	GOR: 7588	
Test Method: flowing	Casing PSI: 2924	Tubing PSI: 2750	Choke Size: 16/64		
Gas Disposition: SOLD	Gas Type: WET	Btu Gas: 1247	API Gravity Oil: 55		
Tubing Size: 2 + 3/8	Tubing Setting Depth: 7498	Tbg setting date: 06/11/2020	Packer Depth: _____		
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
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.	

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/03/2020 End Date: 04/17/2020 Date of First Production this formation: 07/25/2020

Perforations Top: 11340 Bottom: 19179 No. Holes: 135 Hole size: 40/100

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

11340 - 11640; 12433 - 13287; 16348 - 16652; 19079 - 19179.

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:

TPZ: 2176 FNL & 510 FEL

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

Signed: Print Name: Elaine Winick

Title: Completions Tech Date: Email ewinick@extractionog.com

Attachment Check List

Att Doc Num **Name**

402459400 WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

Stamp Upon Approval

Total: 0 comment(s)