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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: 8960 4. Contact Name: Kate Miller
 2. Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (720) 440-6116
 3. Address: 410 17TH STREET SUITE #1400 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: regulatory@bonanzacr.com

5. API Number 05-123-49899-00 6. County: WELD
 7. Well Name: Latham Well Number: F11-J14-14HNB
 8. Location: QtrQtr: NENE Section: 14 Township: 4N Range: 63W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION
 Treatment Date: 05/19/2020 End Date: 05/23/2020 Date of First Production this formation: 08/01/2020
 Perforations Top: 8282 Bottom: 12836 No. Holes: 1035 Hole size: 1/4

Provide a brief summary of the formation treatment: Open Hole:
23-stage plug-and-perf completion;
248,569 total bbls fluid pumped: 248,295 bbls fresh water (slurry) and 274 bbls 15% HCl acid;
7,451,610 total lbs proppant pumped: 6,957,510 lbs 40/70 Ottawa Sand and 494,100 lbs 100 mesh.

This formation is commingled with another formation: Yes No
 Total fluid used in treatment (bbl): 248569 Max pressure during treatment (psi): 8950
 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): 0.87
 Total acid used in treatment (bbl): 274 Number of staged intervals: 23
 Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): 1055
 Fresh water used in treatment (bbl): 248295 Disposition method for flowback: DISPOSAL
 Total proppant used (lbs): 7451610 Rule 805 green completion techniques were utilized:
 Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 08/11/2020 Hours: 24 Bbl oil: 412 Mcf Gas: 282 Bbl H2O: 215
 Calculated 24 hour rate: Bbl oil: 412 Mcf Gas: 282 Bbl H2O: 215 GOR: 684
 Test Method: Flowing Casing PSI: 688 Tubing PSI: 1220 Choke Size: 12/64
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1314 API Gravity Oil: 41
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7165 Tbg setting date: 07/27/2020 Packer Depth: 7155

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 TPZ Location: 276' FNL 955' FWL Section 14 T4N, R63W

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

Signed: _____ Print Name: Aubrey Noonan

Title: Regulatory Analyst Date: _____ Email: regulatory@bonanzacrk.com

Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

User Group	Comment	Comment Date
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Total: 0 comment(s)