

FORM
5ARev
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:

400830466

Date Received:

01/08/2021

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
 2. Name of Operator: WHITING OIL & GAS CORPORATION
 3. Address: 1700 LINCOLN STREET SUITE 4700
 City: DENVER State: CO Zip: 80290
 4. Contact Name: Bethany Kerley
 Phone: (303) 802-8376
 Fax:
 Email: bethany.kerley@whiting.com

5. API Number 05-123-39305-00
 6. County: WELD
 7. Well Name: Razor
 Well Number: 33O-2812
 8. Location: QtrQtr: SWSE Section: 33 Township: 10N Range: 58W Meridian: 6
 9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/27/2015 End Date: 03/05/2015 Date of First Production this formation: 03/19/2015

Perforations Top: 6084 Bottom: 13132 No. Holes: 1260 Hole size: 3/8

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

3,816,054 lbs Premium 20/40 WS, 93,200 lbs Premium 40/70 WS, 815 bbls 15% HCL, 95497 bbls Slickwater

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 96312

Max pressure during treatment (psi): 8645

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): 815

Number of staged intervals: 35

Recycled water used in treatment (bbl): 0

Flowback volume recovered (bbl): 20552

Fresh water used in treatment (bbl): 95497

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 3909254

Rule 805 green completion techniques were utilized: ☒

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/03/2015 Hours: 24 Bbl oil: 843 Mcf Gas: 386 Bbl H2O: 114

Calculated 24 hour rate: Bbl oil: 843 Mcf Gas: 386 Bbl H2O: 114 GOR: 458

Test Method: Separator Casing PSI: 950 Tubing PSI: 475 Choke Size: 28/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1587 API Gravity Oil: 36

Tubing Size: 2 + 3/8 Tubing Setting Depth: 5593 Tbg setting date: 03/19/2015 Packer Depth: 5579

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 corrected to 733 FSL, 1573 FEL calculated on top perf at 6084'.

Updated pound sign to lbs abbreviation in frac description
Corrected Proppant total and freshwater volume. Revised frac summary.
Corrected packer depth

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

Signed: _____ Print Name: Bethany Kerley
Title: Engineering Technician Date: 1/8/2021 Email: bethany.kerley@whiting.com
:

Attachment List

Att Doc Num **Name**

400830466	FORM 5A SUBMITTED
400830567	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passed Permit Review	01/25/2021
Engineering Tech	Returned to DRAFT for review and repair per agreement with operator. Deficiencies previously acknowledged in prior requests.	06/30/2020
Permit	Oper. submitted Form 4#400837986 to correct well number to 33O-2812.	05/13/2015

Total: 3 comment(s)