

FORM  
5A

Rev  
09/20

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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Document Number:

402629806

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: 10633

2. Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

3. Address: 1801 CALIFORNIA STREET #2500

City: DENVER State: CO Zip: 80202

4. Contact Name: Lindsey Organ

Phone: (303) 774 3958

Fax:

Email: cole.carveth@crestonepr.com

5. API Number 05-014-20650-00

7. Well Name: KATS

8. Location: QtrQtr: SWNE Section: 34 Township: 1N Range: 68W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: BROOMFIELD

Well Number: 41-34

## Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 07/20/2012 End Date: 07/20/2012 Date this Formation was Completed:

Perforations Top: 8200 Bottom: 8218 No. Holes: 72 Hole size: 0.41 Open Hole: ☐

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

2874 bbls of water, 9 bbls of additives (GW-45LF, GBW-21, GBW-5, HighPerm CRB, BC-3, BF-9L, ClayCare, XLW-14, FRW-20, NE-945, Flo-Back 40, BioClear 1000) and 0 bbl HCL in a 1 stage frac with 165560 lbs of silica quartz proppant

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

Total fluid used in treatment (bbl): 2883 Max pressure during treatment (psi): 3543

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

Type of gas used in treatment: Min frac gradient (psi/ft): 0.77

Total acid used in treatment (bbl): 0 Number of staged intervals: 1

Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl):

Fresh water used in treatment (bbl): 2883 Disposition method for flowback:

Total proppant used (lbs): 165560

Fracture stimulations must be reported on [FracFocus.org](http://FracFocus.org)

### Test Information:

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: NIOBRARA Status: COMMINGLED Treatment Type: HYDRAULIC FRACTURING

Treatment Date: End Date: Date this Formation was Completed:

Perforations Top: 7946 Bottom: 7964 No. Holes: 20 Hole size: 0.77 Open Hole: ☐

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

5182 bbls of water, 17 bbls of additives (GW-45LF, GBW-21, GBW-5, HighPerm CRB, BC-3, BF-9L, ClayCare, XLW-14, FRW-20, NE-945, Flo-Back 40, BioClear 1000) and 0 bbl HCL in a 1 stage frac with 166220 lbs of silica quartz proppant

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

Total fluid used in treatment (bbl): 5199 Max pressure during treatment (psi): 5073

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

Type of gas used in treatment: Min frac gradient (psi/ft): 0.78

Total acid used in treatment (bbl): 0 Number of staged intervals: 1

Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl):

Fresh water used in treatment (bbl): 5199 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 166220

Fracture stimulations must be reported on FracFocus.org

**Test Information:**

Hours: \_\_\_\_\_ Bbl oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbl H2O: \_\_\_\_\_  
Date: \_\_\_\_\_ 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:

Encana Oil & Gas was the well operator when this hydraulic fracture treatment occurred. Crestone used best available information from third party treatment reports to fill out this form 5A.

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

Signed: \_\_\_\_\_ Print Name: Lindsey Organ  
Title: Regulatory Coordinator Date: \_\_\_\_\_ Email: lindsey.organ@crestonepr.com

**Attachment List**

**Att Doc Num** **Name**

\_\_\_\_\_

Total Attach: 0 Files

**General Comments**

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

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)