

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) 892-2109



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Document Number:
402578003

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: <u>10459</u>	4. Contact Name: <u>Elaine Winick</u>
2. Name of Operator: <u>EXTRACTION OIL & GAS INC</u>	Phone: <u>(970) 576-3461</u>
3. Address: <u>370 17TH STREET SUITE 5200</u>	Fax: <u>(970) 534-6001</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>ewinick@extractionog.com</u>

5. API Number <u>05-123-50286-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>GP Cody Fed</u>	Well Number: <u>20E-15-1</u>
8. Location: QtrQtr: <u>NENE</u> Section: <u>20</u> Township: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>DJ HORIZONTAL NIOBRARA</u> Field Code: <u>16950</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 02/07/2021 End Date: 02/13/2021 Date this Formation was Completed: 04/02/2021

Perforations Top: 7327 Bottom: 13957 No. Holes: 871 Hole size: 40/100 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.

Frac'd Niobrara with 30 stage plug and perf:
6749975 total pounds proppant pumped: 3362565 pounds 40/70 mesh; 3387410 pounds 30/50 mesh.
75459 total bbls fluid pumped: 65187 bbls gelled fluid; 10220 bbls fresh water and 52 bbls 28% HCl Acid.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 75459 Max pressure during treatment (psi): 8643

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.89

Total acid used in treatment (bbl): 52 Number of staged intervals: 30

Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 7036

Fresh water used in treatment (bbl): 10220 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 6749975

Fracture stimulations must be reported on FracFocus.org

Test Information:

04/15/2021 Hours: 24 Bbl oil: 375 Mcf Gas: 2434 Bbl H2O: 264
Date Calculated 24 hour rate: Bbl oil: 375 Mcf Gas: 2434 Bbl H2O: 364 GOR: 6491
Test Method: flowing Casing PSI: 2382 Tubing PSI: 1909 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1297 API Gravity Oil: 55
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7161 Tbg setting date: 03/21/2021 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: 60 FNL & 1246 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 List

Att Doc Num	Name
402667784	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)