

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:

402578007

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 5200

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 05-123-50282-00

7. Well Name: GP Cody Fed

8. Location: QtrQtr: NENE Section: 20 Township: 5N Range: 65W Meridian: 6

9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

6. County: WELD

Well Number: 20E-15-3

## 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: 7279 Bottom: 14171 No. Holes: 1021 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 35 stage plug and perf:  
7007125 total pounds proppant pumped: 3530055 pounds 40/70 mesh; 3477070 pounds 30/50 mesh.  
81998 total bbls fluid pumped: 68246 bbls gelled fluid; 13512 bbls fresh water and 60 bbls 28% HCl Acid.

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

Total fluid used in treatment (bbl): 81998 Max pressure during treatment (psi): 8460  
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): 0.91  
Total acid used in treatment (bbl): 60 Number of staged intervals: 35  
Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 7252  
Fresh water used in treatment (bbl): 13512 Disposition method for flowback: DISPOSAL  
Total proppant used (lbs): 7007125

**Fracture stimulations must be reported on FracFocus.org**

### Test Information:

04/15/2021 Hours: 24 Bbl oil: 411 Mcf Gas: 2459 Bbl H2O: 237  
Calculated 24 hour rate: Bbl oil: 411 Mcf Gas: 2459 Bbl H2O: 237 GOR: 5983  
Test Method: flowing Casing PSI: 2391 Tubing PSI: 1907 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: 7159 Tbg setting date: 03/23/2021 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: 651 FNL & 1504 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  
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## Attachment List

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

402667813 WELLBORE DIAGRAM

Total Attach: 1 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)