

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:
403053630

Date Received:
06/29/2022

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>10633</u>	4. Contact Name: <u>Elaine Winick</u>
2. Name of Operator: <u>CRESTONE PEAK RESOURCES OPERATING LLC</u>	Phone: <u>(303) 294-7806</u>
3. Address: <u>1801 CALIFORNIA STREET #2500</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>ewinick@civiresources.com</u>

5. API Number <u>05-123-50735-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Warner</u>	Well Number: <u>2B-10H-E165</u>
8. Location: QtrQtr: <u>SWNW</u> Section: <u>10</u> Township: <u>1N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 04/09/2022 End Date: 04/18/2022 Date this Formation was Completed: 06/02/2022

Perforations Top: 7420 Bottom: 14375 No. Holes: 1804 Hole size: 26/100 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 41 stage plug and perf:
12616182 total pounds proppant pumped: 12415892 pounds 40/70 mesh; 200290 pounds 100 mesh.
399173 total bbls fluid pumped: 387700 bbls gelled fluid; 10974 bbls fresh water and 499 bbls 15% HCl Acid.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 399173 Max pressure during treatment (psi): 8756

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): 0.89

Total acid used in treatment (bbl): 499 Number of staged intervals: 41

Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 600

Fresh water used in treatment (bbl): 10974 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 12616182

Fracture stimulations must be reported on FracFocus.org

Test Information:

06/14/2022 Hours: 24 Bbl oil: 193 Mcf Gas: 258 Bbl H2O: 199
Date: 06/14/2022 Calculated 24 hour rate: Bbl oil: 193 Mcf Gas: 258 Bbl H2O: 199 GOR: 1337
Test Method: flowing Casing PSI: 712 Tubing PSI: 1446 Choke Size: 11/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1325 API Gravity Oil: 40
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7388 Tbg setting date: 05/16/2022 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: 2169 FNL & 808 FWL

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: 6/29/2022 Email: ewinick@civiresources.com

Attachment List

Att Doc Num	Name
403053630	FORM 5A SUBMITTED
403092873	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)