



State of Colorado  
Oil and Gas Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

COMPLETED INTERVAL REPORT

This form is to be submitted or updated each time a new formation is completed or abandoned. This form shall be transmitted within (30) days of work. Additional information is found under Rule 308. Complete a section for each formation completed or recompleted including all attempted completions. Attach as many pages as required to fully describe the work.

FOR OGCC USE ONLY

SEP 25 1998

ET	OE	PR	ES
			PR

Complete the  
Attachment Checklist

OGCC Operator Number: 41385	4. Contact Name & Phone	Oper	OGCC
Name of Operator: HS Resources, Inc.	Elaine Rivas	Wellbore Diagram	X
Address: 3939 Carson Avenue	No: 970-330-0614	Site Facility Diagram	
City: Evans State: CO Zip: 80620	Fax: 970-330-0431		
API Num: 05-001-9374			
Well Name: HSR-Burchfield	Number: 7-10		
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNE Sec 10-T3S-R60W 6th P.M.			

FORMATION: D Sand Producing Y ☒ N ☐ Commingled ☐ OGCC PR

Perforations Gross Interval: Top 6346'	Bottom 6352'	No. Holes:	Size:	Open Hole Completion
Formation Treatment Describe:				
Frac'd D Sand w/24,780 gals of Super Rheo-Gel; 35,180# 20/40 mesh sand & 15,360# 20/40 Carbo Lite				
Test Information Date: 09/12/98	Hours: 24	Bbls Oil: 27	MCF Gas: 25	Bbls H <sub>2</sub> O: 53
Production Test Method: pumping unit	Casing Pressure: 50	Flowing Tubing Pressure: 50	Choke Size: N/A	
API Gravity Oil: 60	BTU Gas:	Gas Disposition: sold		
Calculated 24 Hr Rate	Bbls Oil: 27	MCF Gas: 25	Bbls H <sub>2</sub> O: 53	GOR: 926
Production Method: Pumping				
Tubing Size: 2-3/8"	Setting Depth: 6304'	Packer Depth: N/A		
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason Shut in:				
Abandonment of Zone	Date:	Squeezed:	Sacks Cement:	
Bridge Plug Depth:	Sacks Cement on Top:			

FORMATION: Producing Y ☐ N ☐ Commingled ☐ OGCC

Perforations Gross In Top	Bottom	No. Holes:	Size:	Open Hole Completion
Formation Treatment Describe:				
Test Information Date:	Hours:	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:
Production Test Method:	Casing Pressure:	Flowing Tubing Pressure:	Choke Size:	
API Gravity Oil:	BTU Gas:	Gas Disposition:		
Calculated 24 Hr Rate	Bbls Oil:	MCF Gas:	Bbls H <sub>2</sub> O:	GOR:
Production Method:				
Tubing Size:	Setting Depth:	Packer Depth:		
Non-producing Completion Status: <input type="checkbox"/> Abd <input type="checkbox"/> SI Reason Shut in:				
Abandonment of Zone	Date:	Squeezed:	Sacks Cement:	
Bridge Plug Depth:	Sacks Cement on Top:			

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

Print Name Elaine Rivas

Operations Technician

Date: 09/23/98



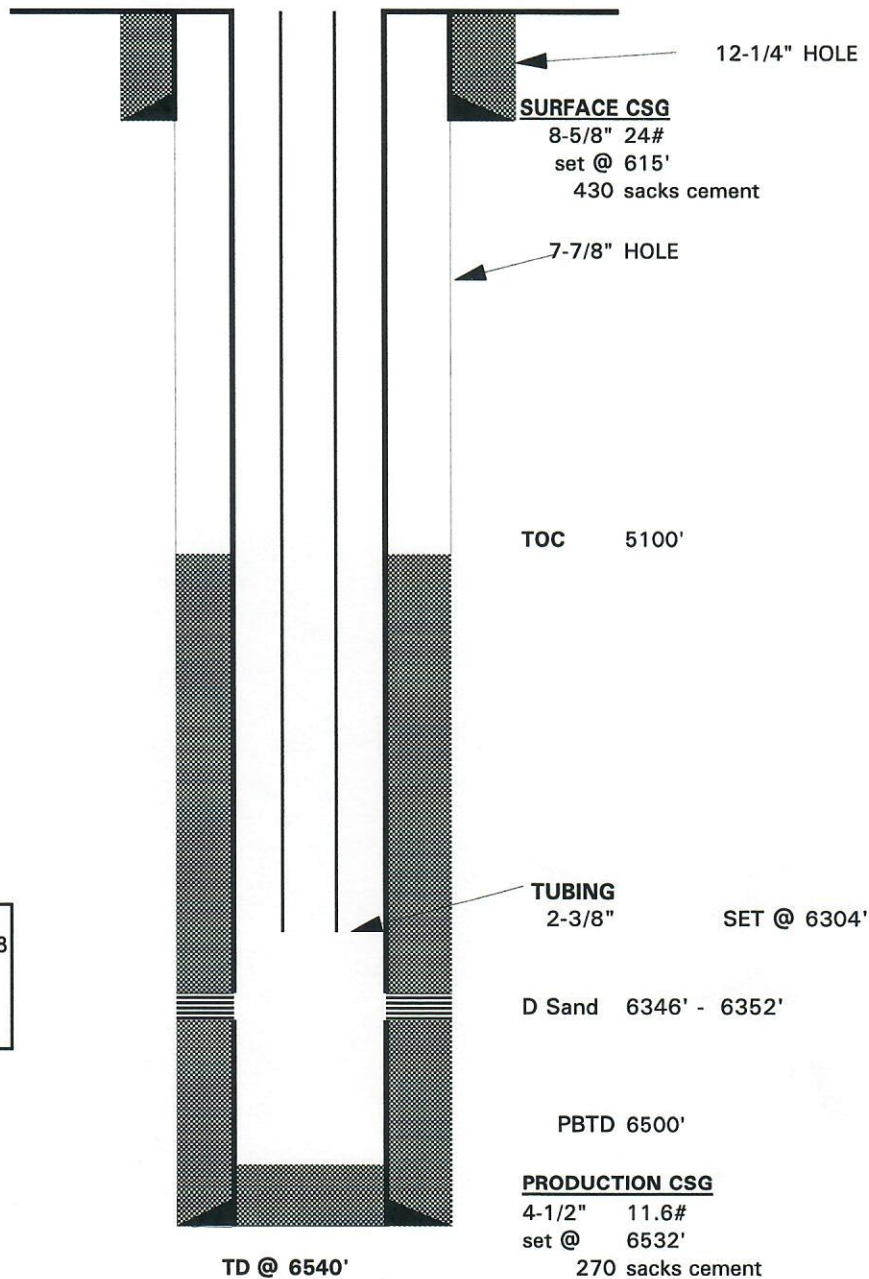
**HSR-Burchfield 7-10**

SWNE Sec 10-T3S-R60W 6th P.M.

SEP 25 1998

**FIELD:** Wildflower  
**COUNTY:** Adams  
**STATE:** CO  
**API#:** 05-001-9374

Surface location: 2000' FNL & 2000' FEL  
 GL Elevation: 5006'  
 KB Elevation: 5017'  
 Spud date: 04/11/98  
 TD date: 04/17/98  
 D Sand Prod Date: 07/21/98  
 Bottom hole location: same  
**ZONES PRODUCING** D Sand



<b>FRAC DATA:</b>	D Sand	Frac Date:	06/09/98
	15360 # 20/40 Carbolite		
	35180 # 20/40 mesh		
	24780 gal. gelled fluid		

Created by: Elaine Rivas  
 Date Created: 9/23/98

Not To Scale