

FORM
5A

Rev
09/20

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
----	----	----	----

Document Number:

403470612

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>10261</u>	4. Contact Name: <u>Robert Carney</u>
2. Name of Operator: <u>BAYSWATER EXPLORATION & PRODUCTION LLC</u>	Phone: <u>(303) 8932503</u>
3. Address: <u>730 17TH ST STE 500</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>RCarney@bayswater.us</u>

5. API Number <u>05-123-51753-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>Ruby West</u>	Well Number: <u>5</u>
8. Location: QtrQtr: <u>NESW</u> Section: <u>7</u> Township: <u>7N</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: ACTIVE Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 01/03/2023 End Date: 01/23/2023 Date this Formation was Completed: 05/31/2023

Perforations Top: 8338 Bottom: 17755 No. Holes: 1242 Hole size: 0.433 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.

542892 bbls total; 17409930 # sand total(200/mesh 1958545 100/mesh 40/70 15451385 30/50); 999 gals HCL

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 542892 Max pressure during treatment (psi): 9657

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: Min frac gradient (psi/ft): 1.01

Total acid used in treatment (bbl): 24 Number of staged intervals: 46

Recycled or Reused Fluids used in treatment (bbl): Flowback volume recovered (bbl): 3265

Fresh water used in treatment (bbl): 542868 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 17409930

Fracture stimulations must be reported on FracFocus.org

Test Information:

05/31/2023 Hours: 24 Bbl oil: 7 Mcf Gas: 12 Bbl H2O: 1389
Date Calculated 24 hour rate: Bbl oil: 7 Mcf Gas: 12 Bbl H2O: 1389 GOR: 1714
Test Method: Flowing Casing PSI: 0 Tubing PSI: 1815 Choke Size: 14/64
Gas Disposition: SOLD Gas Type: SHALE Btu Gas: 1384 API Gravity Oil: 42
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7870 Tbg setting date: 05/17/2023 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: 1887 FNL, 638 FEL Sec 12

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

Signed: Print Name: Robert Carney

Title: Engineer Date: Email RCarney@bayswater.us

Attachment List

Att Doc Num	Name
403519926	OPERATIONS SUMMARY

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)