

FORM  
5A  
Rev  
09/20

State of Colorado  
Energy & Carbon Management Commission



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

5. API Number 05-005-07498-00  
6. County: ARAPAHOE  
7. Well Name: Lone Tree  
Well Number: 4-65 15-16 4BH  
8. Location: QtrQtr: SENE Section: 15 Township: 4S Range: 65W Meridian: 6  
9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 06/03/2023 End Date: 06/19/2023 Date this Formation was Completed: 08/16/2023

Perforations Top: 8891 Bottom: 18713 No. Holes: 3237 Hole size: 35/100 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 58 stage plug and perf:  
11390624 total pounds proppant pumped: 5948245 pounds 40/70 mesh; 5442379 pounds 100 mesh;  
485979 total bbls fluid pumped: 454494 bbls gelled fluid; 25247 bbls fresh water and 6238 bbls 15% HCl Acid.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 485979 Max pressure during treatment (psi): 8525

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): 0.93

Total acid used in treatment (bbl): 6238 Number of staged intervals: 58

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

Fresh water used in treatment (bbl): 25247 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 11390624

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

### Test Information:

08/26/2023 Hours: 24 Bbl oil: 245 Mcf Gas: 266 Bbl H2O: 455  
Date Calculated 24 hour rate: Bbl oil: 245 Mcf Gas: 266 Bbl H2O: 455 GOR: 1086  
Test Method: flowing Casing PSI: 1758 Tubing PSI: 2118 Choke Size: 12/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1300 API Gravity Oil: 41  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8599 Tbg setting date: 07/28/2023 Packer Depth: 8596

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 405 FSL & 355 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@civiresources.com

## Attachment List

Att Doc Num	Name
403524825	WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Stamp Upon  
Approval

Total: 0 comment(s)