

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



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Document Number:  
403328890

Date Received:  
05/30/2023

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>555 17TH STREET SUITE 3700</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>ewinick@civiresources.com</u>

5. API Number <u>05-005-07512-00</u>	6. County: <u>ARAPAHOE</u>
7. Well Name: <u>Prosper Farms 4-65 11-12</u>	Well Number: <u>2BH</u>
8. Location: QtrQtr: <u>NESE</u> Section: <u>10</u> Township: <u>4S</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>DJ HORIZONTAL NIOBRARA</u> Field Code: <u>16950</u>	

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 03/31/2023 End Date: 04/12/2023 Date this Formation was Completed: 05/09/2023

Perforations Top: 8273 Bottom: 18098 No. Holes: 2552 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:  
11333945 total pounds proppant pumped: 3692675 pounds 40/70 mesh; 7641270 pounds 100 mesh;  
497353 total bbls fluid pumped: 459233 bbls gelled fluid; 36668 bbls fresh water and 1452 bbls 15% HCl Acid.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 497353 Max pressure during treatment (psi): 8699

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): 1452 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): 36668 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 11333945

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

### Test Information:

05/19/2023 Hours: 24 Bbl oil: 441 Mcf Gas: 418 Bbl H2O: 596  
Date: 05/19/2023 Calculated 24 hour rate: Bbl oil: 441 Mcf Gas: 418 Bbl H2O: 596 GOR: 948  
Test Method: FLOWING Casing PSI: 376 Tubing PSI: 1333 Choke Size: 18/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1300 API Gravity Oil: 41  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7872 Tbg setting date: 04/29/2023 Packer Depth: 7869

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 2203 FNL & 341 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: 5/30/2023 Email: ewinick@civiresources.com

## Attachment List

Att Doc Num	Name
403328890	FORM 5A SUBMITTED
403409712	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	TPZ footages corrected to as-completed footages in Well Update per operator comment on Form 5A.	11/30/2023

Total: 1 comment(s)