

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:

403553146

Date Received:

11/30/2023

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: 10633

2. Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

3. Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

4. Contact Name: Elaine Winick

Phone: (303) 294-7806

Fax:

Email: ewinick@civiresources.com

5. API Number 05-123-51951-00

7. Well Name: Cosslett East

8. Location: QtrQtr: SENE Section: 22 Township: 1N Range: 68W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 1D-22H-H168

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 07/31/2023 End Date: 08/10/2023 Date this Formation was Completed: 11/10/2023
Perforations Top: 8789 Bottom: 18387 No. Holes: 3275 Hole size: 36/100 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 57 stage plug and perf;
7250820 total lbs proppant pumped: 222763 lbs 40/70 mesh and 7028057 lbs 100 mesh;
315531 total bbls fluid pumped: 291579 bbls gelled fluid, 179 bbls recycled water, 23072 bbls fresh water and 701 bbls 15% HCl Acid.

This formation is commingled with another formation: ☐ Yes ☒ No

Total fluid used in treatment (bbl): 315531 Max pressure during treatment (psi): 9006
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): 0.85
Total acid used in treatment (bbl): 701 Number of staged intervals: 57
Recycled or Reused Fluids used in treatment (bbl): 179 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 23072 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 7250820

Fracture stimulations must be reported on FracFocus.org

Test Information:

11/21/2023 Hours: 24 Bbl oil: 515 Mcf Gas: 1286 Bbl H2O: 338
Date: 11/21/2023 Calculated 24 hour rate: Bbl oil: 515 Mcf Gas: 1286 Bbl H2O: 338 GOR: 2497
Test Method: flowing Casing PSI: 2250 Tubing PSI: 1471 Choke Size: 20/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1300 API Gravity Oil: 38
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8694 Tbg setting date: 10/23/2023 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 471 FNL & 1341 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: 11/30/2023 Email: ewinick@civiresources.com

Attachment List

Att Doc Num	Name
403553146	FORM 5A SUBMITTED
403611741	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passes Permitting	02/26/2024

Total: 1 comment(s)