

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:

403553194

Date Received:

02/16/2024

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. ECMC 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) 2947806

Fax:

Email: ewinick@civiresources.com

5. API Number 05-005-07516-00

7. Well Name: Prosper Farms 4-65

8. Location: QtrQtr: NWSW Section: 2 Township: 4S Range: 65W Meridian: 6

9. Field Name: DJ HORIZONTAL NIOBRARA Field Code: 16950

6. County: ARAPAHOE

Well Number: 2-1-6 3AH

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 10/09/2023 End Date: 10/28/2023 Date this Formation was Completed: 01/21/2024
Perforations Top: 8214 Bottom: 23581 No. Holes: 3614 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 91 stage plug and perf:
17803630 total pounds proppant pumped: 8455263 pounds 40/70 mesh; 9348367 pounds 100 mesh;
763041 total bbls fluid pumped: 713417 bbls gelled fluid; 43124 bbls fresh water and 6500 bbls 15% HCl Acid.

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

Total fluid used in treatment (bbl): 763041 Max pressure during treatment (psi): 8907
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 0.87
Total acid used in treatment (bbl): 6500 Number of staged intervals: 91
Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 43124 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 17803630

Fracture stimulations must be reported on [FracFocus.org](https://www.fracfocus.org)

Test Information:

Hours: 24 Bbl oil: 859 Mcf Gas: 683 Bbl H2O: 1215
Calculated 24 hour rate: Bbl oil: 859 Mcf Gas: 683 Bbl H2O: 1215 GOR: 795
Test Method: flowing Casing PSI: 1312 Tubing PSI: 1562 Choke Size: 22/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1400 API Gravity Oil: 40
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7933 Tbg setting date: 01/07/2024 Packer Depth: 7931
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 2235 FSL & 377 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: 2/16/2024 Email: ewinick@civiresources.com

ATTACHMENT LIST

Att Doc Num	Name
403553194	FORM 5A SUBMITTED
403658412	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Passes Permitting	06/07/2024

Total: 1 comment(s)