

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:

403791431

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. 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 05-005-07541-00

7. Well Name: Sky Ranch 4-65 10-9-8-7

8. Location: QtrQtr: NESE Section: 10 Township: 4S Range: 65W Meridian: 6

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

6. County: ARAPAHOE

Well Number: 3AH

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 02/24/2024 End Date: 03/27/2024 Date this Formation was Completed: 06/07/2024
Perforations Top: 8352 Bottom: 26773 No. Holes: 4428 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 110 stage plug and perf:
21330220 total pounds proppant pumped: 8572500 pounds 40/70 mesh; 12757720 pounds 100 mesh;
931426 total bbls fluid pumped: 856888 bbls gelled fluid; 67395 bbls fresh water and 7143 bbls 15% HCl Acid.
Skipped stages 1 through 10 due to cement in well.

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

Total fluid used in treatment (bbl): 931426 Max pressure during treatment (psi): 8965
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): 0.92
Total acid used in treatment (bbl): 7143 Number of staged intervals: 100
Recycled or Reused Fluids used in treatment (bbl): 0 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 67395 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 21330220

Fracture stimulations must be reported on FracFocus.org

Test Information:

06/13/2024 Hours: 24 Bbl oil: 558 Mcf Gas: 661 Bbl H2O: 1166
Date Calculated 24 hour rate: Bbl oil: 558 Mcf Gas: 661 Bbl H2O: 1166 GOR: 1185
Test Method: flowing Casing PSI: 2075 Tubing PSI: 2338 Choke Size: 18/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1400 API Gravity Oil: 40
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7900 Tbg setting date: 05/22/2024 Packer Depth: 7898
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 2321 FSL & 515 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

403825818 WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|-----------------------|----------------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)