

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:

403862040

Date Received:

08/09/2024

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: 10690

2. Name of Operator: IMPETRO RESOURCES LLC

3. Address: 558 CASTLE PINES PKWY UNIT B-4

City: CASTLE PINES State: CO Zip: 80108

4. Contact Name: Brent Bongers

Phone: (361) 935-5633

Fax:

Email: bbongers@impetrorresources.com

5. API Number 05-121-10865-00

7. Well Name: CHURCH

8. Location: QtrQtr: NENE Section: 25 Township: 3S Range: 51W Meridian: 6

9. Field Name: RUSH WILLADEL Field Code: 76000

6. County: WASHINGTON

Well Number: 41A-25

Completed Interval

FORMATION: J SAND Status: PRODUCING Treatment Type: _____
Treatment Date: _____ End Date: _____ Date this Formation was Completed: 01/19/2006
Perforations Top: 3942 Bottom: 3998 No. Holes: 80 Hole size: 0.49 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.

This formation is commingled with another formation: ☐ Yes ☒ No
Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____
Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____
Total acid used in treatment (bbl): _____ Number of staged intervals: _____
Recycled or Reused Fluids used in treatment (bbl): _____ Flowback volume recovered (bbl): _____
Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____
Total proppant used (lbs): _____

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

Test Information:

Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____
Date: _____ Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____
Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____
Tubing Size: 2 + 7/8 Tubing Setting Depth: 3905 Tbg setting date: 06/27/2024 Packer Depth: _____
Reason for Non-Production: CIBP was set to isolate perfs at 3993-3998'. Well is producing from 6/16/2008 completed perfs at 3942-3957'.
Date formation Abandoned: 06/28/2024 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____
** Bridge Plug Depth: 3980 ** Sacks cement on top: 2 ** Wireline and Cement Job Summary must be attached.

Comment:

Work was completed per Form 4 Document #403763109. PBTD is 3905'. Well is not producing under a packer. Well is producing from 6/16/2008 completed perfs at 3942-3957'.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Amber Barnett
Title: Compliance Specialist Date: 8/9/2024 Email: abarnett@ardorenvironmental.com

ATTACHMENT LIST

Att Doc Num	Name
403862040	FORM 5A SUBMITTED
403881016	WIRELINE JOB SUMMARY
403884225	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	<p>Please input CICR information at bottom of panel in appropriate data fields. Also, attach a copy of the wireline job summary to verify CICR/cement setting information.</p> <p>Confirm formation tops as referenced on WBD and on scout card, as there appears to be a discrepancy regarding the D and J Sand formation depths. If necessary, formation top updates can be made via a comment on the Submit tab on a Form 4 and the necessary changes will be made internally by ECMC permitting.</p> <p>Returned to draft.</p>	08/01/2024
Engineer	<p>Returning to draft. Please include the new PBTD in the comments on the Form 5A. Is this well being produced under a packer?</p>	07/31/2024

Total: 2 comment(s)