

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:  
404031343

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: <u>69175</u>	4. Contact Name: <u>Randy Thweatt</u>
2. Name of Operator: <u>PDC ENERGY INC</u>	Phone: <u>(303) 829-2393</u>
3. Address: <u>1099 18TH STREET SUITE 1500</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>DenverRegulatory@chevron.com</u>

5. API Number <u>05-123-51787-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>George</u>	Well Number: <u>13N</u>
8. Location: QtrQtr: <u>SWNE</u> Section: <u>21</u> Township: <u>4N</u> Range: <u>64W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

## Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 10/11/2024 End Date: 10/17/2024 Date this Formation was Completed: 11/27/2024

Perforations Top: 7693 Bottom: 17273 No. Holes: 852 Hole size: 0.38 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.

Niobrara completed with 240 bbls 28% HCL, 157,597 bbls slurry, 35,759 bbls recycled water, 9,599,268 lb 40/140 Sand.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 193596 Max pressure during treatment (psi): 8293

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.43

Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 1.00

Total acid used in treatment (bbl): 240 Number of staged intervals: 36

Recycled or Reused Fluids used in treatment (bbl): 35759 Flowback volume recovered (bbl): 0

Fresh water used in treatment (bbl): 157597 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 9599268

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

### Test Information:

12/13/2024 Hours: 24 Bbl oil: 487 Mcf Gas: 1428 Bbl H2O: 333  
Date Calculated 24 hour rate: Bbl oil: 487 Mcf Gas: 1428 Bbl H2O: 333 GOR: 2932  
Test Method: Flowing Casing PSI: 2464 Tubing PSI: 1717 Choke Size: 22/64  
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1220 API Gravity Oil: 42  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7512 Tbg setting date: 11/17/2024 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:

Actual TPZ is Sec 21, T4N R64W: 2557' FNL, 714' FEL

This well did not flowback, the well went straight to the production facility.

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

Signed: \_\_\_\_\_ Print Name: Kim Bauer

Title: Regulatory Analyst II Date: \_\_\_\_\_ Email: DenverRegulatory@chevron.com

### ATTACHMENT LIST

Att Doc Num	Name
404031361	WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)