

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:
404267276

Date Received:
07/03/2025

COMPLETED INTERVAL REPORT

The Completed Interval Report, Form 5A, will be submitted by the Operator within thirty (30) days after the operations listed in Rule 416.a. The Operator will report the details of any Stimulation performed including, but not limited to, Hydraulic Fracturing Treatment and acidizing Stimulation. In order to resolve completed interval information uncertainties, the Director may require an Operator to submit further information in an additional Form 5A.

1. ECMC Operator Number: 96850

2. Name of Operator: TEP ROCKY MOUNTAIN LLC

3. Address: 1058 COUNTY ROAD 215
City: PARACHUTE State: CO Zip: 81635

4. Contact Name: MELISSA LUKE
Phone: (970) 263-2721
Fax: _____
Email: mluke@terraep.com

5. API Number 05-103-12592-00

6. County: RIO BLANCO

7. Well Name: FEDERAL
Well Number: RG 323-13-298

8. Location: QtrQtr: Lot 4 Section: 13 Township: 2S Range: 98W Meridian: 6

9. Field Name: SULPHUR CREEK Field Code: 80090

10. If Directional, footage at Top of Prod. Zone: _____ Feet _____ Feet _____
Sec: _____ Twp: _____ Rng: _____

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 04/14/2025 End Date: 04/27/2025 Date this Formation was Completed: 06/03/2025

Perforations Top: 8097 Bottom: 11876 No. Holes: 480 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.

256,474 BBLS OF SLICKWATER AND 2,791 GALS OF BIOCID

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 256474 Max pressure during treatment (psi): 6953

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

Type of gas used in treatment: Min frac gradient (psi/ft): 0.66

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

Recycled or Reused Fluids used in treatment (bbl): 256474 Flowback volume recovered (bbl): 82103

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

Total proppant used (lbs):

Fracture stimulations must be reported on FracFocus.org

Test Information:

06/03/2025 Hours: 24 Bbl oil: 0 Mcf Gas: 4500 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 4500 Bbl H2O: 0 GOR: 0

Test Method: FLOWING Casing PSI: 2900 Tubing PSI: 2600 Choke Size: 39/125

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 0 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 11497 Tbg setting date: 04/30/2025 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:

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

Signed: Print Name: MELISSA LUKE

Title: REGULATORY SPECIALIST Date: 7/3/2025 Email: mluke@terraep.com

ATTACHMENT LIST

Att Doc Num	Name
404267276	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date
Permit	Passed Completion review	07/17/2025

Total: 1 comment(s)