

FORM
5ARev
06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

402491896

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. OGCC Operator Number: 61250
 2. Name of Operator: MULL DRILLING COMPANY INC
 3. Address: 1700 N WATERFRONT PKWY B#1200
 City: WICHITA State: KS Zip: 67206-
 4. Contact Name: Mark Shreve
 Phone: (316) 264-6366
 Fax: (316) 264-6440
 Email: mshreve@mulldrilling.com

5. API Number 05-017-07021-00
 6. County: CHEYENNE
 7. Well Name: NW ARAPAHOE UT (NWAU)
 Well Number: 34
 8. Location: QtrQtr: NENW Section: 7 Township: 14S Range: 42W Meridian: 6
 9. Field Name: ARAPAHOE Field Code: 2875

Completed Interval

FORMATION: MORROW Status: PRODUCING Treatment Type:

Treatment Date: End Date: Date of First Production this formation: 09/09/1989

Perforations Top: 5265 Bottom: 5276 No. Holes: 124 Hole size: 52/100

Provide a brief summary of the formation treatment: Open Hole: ☐

This Form 5A is being submitted to update COGCC records for work done previously and reported on Form 4's.

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 water used in treatment (bbl):

Flowback volume recovered (bbl):

Fresh water used in treatment (bbl):

Disposition method for flowback:

Total proppant used (lbs):

Rule 805 green completion techniques were utilized: ☐

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:

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: 5286 Tbg setting date: 05/27/2015 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:

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

Signed: _____ Print Name: Risa O'Bryhim

Title: Prod Tech Date: _____ Email: robryhim@mulldrilling.com
:

Attachment Check List

Att Doc Num **Name**

402491903	WELLBORE DIAGRAM
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Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)