

FORM
5A

Rev
09/20

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 892-2109



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Document Number:

402705722

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: 96850

2. Name of Operator: TEP ROCKY MOUNTAIN LLC

3. Address: PO BOX 370

City: PARACHUTE

State: CO

Zip: 81635

4. Contact Name: Jeff Kirtland

Phone: (970) 263-2736

Fax:

Email: jkirtland@terraep.com

5. API Number 05-045-24361-00

7. Well Name: CHEVRON

8. Location: QtrQtr: SWNW

Section: 20

Township: 6S

Range: 96W

Meridian: 6

9. Field Name: GRAND VALLEY

Field Code: 31290

6. County: GARFIELD

Well Number: GM 632-19

Completed Interval

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING
Treatment Date: 03/29/2021 End Date: 04/07/2021 Date this Formation was Completed: 05/06/2021
Perforations Top: 5817 Bottom: 7616 No. Holes: 264 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.

85619 bbls of Slickwater; 2855 gals Biocide

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

Total fluid used in treatment (bbl): 85687 Max pressure during treatment (psi): 7076
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): 0.73
Total acid used in treatment (bbl): 0 Number of staged intervals: 11
Recycled or Reused Fluids used in treatment (bbl): 85619 Flowback volume recovered (bbl): 39596
Fresh water used in treatment (bbl): 68 Disposition method for flowback: RECYCLE
Total proppant used (lbs): 0

Fracture stimulations must be reported on FracFocus.org

Test Information:

05/06/2021 Hours: 24 Bbl oil: 0 Mcf Gas: 1680 Bbl H2O: 0
Date Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1680 Bbl H2O: 0 GOR:
Test Method: Flowing Casing PSI: 1440 Tubing PSI: 1352 Choke Size: 48/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1172 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7448 Tbg setting date: 04/09/2021 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: Ashley Noonan
Title: Senior Regulatory Analyst Date: Email: anoonan@terraep.com

Attachment List

Att Doc Num Name

402705723 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)