



Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

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FEB 25 2010
COGCC

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 100185	4. Contact Name: RUTHANN MORSS	Complete the Attachment Checklist OP OGCC
2. Name of Operator: EnCana Oil & Gas (USA) Inc.	Phone: 720-876-5060	
3. Address: 370 17th Street, Suite 1700 City: Denver State: CO Zip: 80202	Fax: 720-876-6060	
5. API Number 05-045-07427	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: COUEY	7. Well/Facility Number: 8-16	Directional Survey
8. Location (Qtr/Clr, Sec, Twp, Rng, Meridian): NESE SEC. 8-T7S-R92W 6TH P.M.		Surface Eqpmt Diagram
9. County: Garfield	10. Field Name: Mamm Creek	Technical Info Page X
11. Federal, Indian or State Lease Number:		Other

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bottomhole location Qtr/Clr, Sec, Twp, Rng, Mer _____

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____

Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No

Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:
Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

CHANGE SPACING UNIT

Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration

Remove from surface bond
Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):
Effective Date: _____
Plugging Bond: Blanket Individual

CHANGE WELL NAME NUMBER
From: _____
To: _____
Effective Date: _____

ABANDONED LOCATION:
Was location ever built? Yes No
Is site ready for inspection? Yes No
Date Ready for Inspection: _____

NOTICE OF CONTINUED SHUT IN STATUS
Date well shut in or temporarily abandoned: _____
Has Production Equipment been removed from site? Yes No
MIT required if shut in longer than two years. Date of last MIT _____

SPUD DATE: _____

REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK *submit cbl and cement job summaries

Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.
Final reclamation will commence on approximately _____ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent Approximate Start Date: UPON APPROVAL

Report of Work Done Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input checked="" type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input type="checkbox"/> Other: _____	for Spills and Releases

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

Signed: Ruthann Morss Date: 2/25/10 Email: RUTHANN.MORSS@ENCANA.COM
Print Name: RUTHANN MORSS Title: Regulatory Analyst

COGCC Approved: David Andrews Title: PE II Date: 3/2/2010

CONDITIONS OF APPROVAL, IF ANY:

During this six-month venting period, collect a production gas sample and a gas sample from the production casing - surface casing annulus. Analyze both gas samples for composition (C1 through C12) and stable isotopes of methane, ethane, and propane (Isotech Laboratories NG-2 analysis or similar). Submit analytical results on a Form 4 (Sundry Notice) to the attention of David Andrews (COGCC Engineering Supervisor).

TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY
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1. OGCC Operator Number:	100185	API Number:	05-045-07427
2. Name of Operator:	EnCana Oil & Gas (USA) Inc.	OGCC Facility ID #	
3. Well/Facility Name:	COUEY	Well/Facility Number:	8-16
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NESE SEC. 8-T7S-R92W 6TH P.M.		

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Well Information:

Well:	Couey 8-16		
TD:	5970'	Surf csg:	2265'
PBTD:	5923'	TOC:	2265'
Prod csg:	5970'	Perfs:	4100' - 5802'

2-25-10: Built to 300 psi in 5 days, blew down in 5 seconds through 1/4" valve. Spits up a little of water when blown down. Hooked to roll-top tank. Request approval to vent for 180 days.