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OCT 04 2010

COGCC/Rifle Office

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: | HEATHER MITCHELL |
| 2. Name Of Operator: | EnCana Oil & Gas (USA) Inc. | Phone: | 720-876-3070 |
| 3. Address: | 370 17th Street, Suite 1700 | Fax: | 720-876-4070 |
| City: | Denver | State: | CO |
| Zip: | 80202 | | |
| 5. API Number: | 03045191450000 | OGCC Facility ID Number | 8-5B1 (K8W) |
| 6. Well/Facility Name: | GMR 8-5B1 (K8W) | 7. Well/Facility Number: | 8-5B1 (K8W) |
| 8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): | NESW Sec 8 T7S - R93W 6th PM | | |
| 9. County: | GARFIELD | 10. Field Name: | Mamm Creek |
| 11. Federal, Indian or State Lease Number: | | | |

Complete the Attachment Checklist

| | | | |
|-----------------------|-------------------------------------|----|------|
| Survey Plat | <input type="checkbox"/> | OP | OGCC |
| Directional Survey | <input type="checkbox"/> | | |
| Surface Eqpmt Diagram | <input type="checkbox"/> | | |
| Technical info Page | <input checked="" type="checkbox"/> | | |
| Other | <input type="checkbox"/> | | |

General Notice

(a change of surface att/qtr is substantive and requires a new permit)
FNL/FSL

CHANGE OF LOCATION: Attach New Survey Plat

Change of Surface Footage from Exterior Section Lines:
Change of Surface Footage to Exterior Section Lines:
Change of Bottomhole Footage from Exterior Section Lines:
Change of Bottomhole Footage to Exterior Section Lines:
Bottom hole location Qtr/Qtr, Sec, Twp, Rng, Mer

Latitude Distance to nearest property line
Longitude Distance to nearest lease line
Ground Elevation Distance to nearest well same formation

Distance to nearest bldg, public rd, utility or RR
Is location in a High Density Area (Rule 603b)? Yes/No
Surface owner consultation date:

attach directional survey

GPS DATA:

Date of Measurement

PDOP Reading

Instrument Operator's Name

| CHANGE SPACING UNIT | | PDOP Reading | | Instrument Operator's Name | | Remove from surface bond | |
|---|-----------------------------------|-----------------------------|---|---|---------------------------------------|-----------------------------|--|
| Formation | Formation Code | Spacing order number | Unit Acreage | Unit configuration | Signed surface use agreement attached | | |
| CHANGE OF OPERATOR (prior to drilling): | | | | CHANGE WELL NAME | | NUMBER | |
| Effective Date: | From: | To: | Effective Date: | | | | |
| Plugging Bond: | Blanket | Individual | | | | | |
| ABANDONED LOCATION: | | | | NOTICE OF CONTINUED SHUT IN STATUS | | | |
| Was location ever built? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date well shut in or temporarily abandoned: | | | | |
| Is site ready for inspection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Has Production Equipment been removed from site? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Date Ready for Inspection: | | | 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 | | | | | | | |
| 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

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Notice of Intent | Report of Work Done | |
| Approximate Start Date: | 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 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 for spills and Releases |
| <input type="checkbox"/> Casing/Cementing Program Change | <input checked="" type="checkbox"/> Other: Request to complete | |

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

Signed: *Heather Mitchell*

Date: 10/04/2010

Email: Heather.Mitchell@encana.com

Print Name: HEATHER MITCHELL

Title: REGULATORY ANALYST

COGCC Approved:

Title:

EIT III

Date: OCT 05 2010

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY



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COGCC/Rifle Office

1. OGCC Operator Number: 100185
 2. Name of Operator: EnCana Oil & Gas (USA) Inc
 3. Well/Facility Name: GMR 8-5B1 (K&W)
 4. Location (Qtr/Ctr, Sec, Twp, Rng, Meridian): NESW Sec 8 T7S - R93W 8th PM
- API Number: 06045191450000
OGCC Facility ID # 8-5B1 (K&W)
Well/Facility Number: 8-5B1 (K&W)

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

THE REFERENCED WELL HAS BEEN SUCCESSFULLY CEMENTED ACCORDING TO THE APPROVED PLAN AND SUMMARY OF THE BRADENHEAD MONITORING COMPLETED.

ENCANA OIL & GAS (USA) INC. REQUESTS APPROVAL TO COMMENCE COMPLETIONS OPERATIONS.

ATTACHMENTS:

CBL
AS-BUILT WELLBORE SCHEMATIC
TEMPERATURE SURVEY
BRADENHEAD PRESSURE SUMMARY

RECEIVED
OCT 04 2010
COGCC/Rifle Office

GMR 8-5BI
Casing &
Hole size

Permit Estimated
Formation Tops
(MD / TVD)
Wasatch; Surface

Actual
Conditions
(MD / TVD)

16" Conductor @ 40'
Cement to surface with 5 yds redi-mix

26" Conductor @ 41

12-1/4" Hole

12-1/4" Hole

9 5/8", 36# / 24#, J/K55 Surface Casing @ 1250'

9-5/8", 36#, J/K55 Surface Casing @ 1303'
Cement to surface with:
Lead: 211 sx, 12.5 Cement 2.1 ft/sk
Tail: 149 sx, 15.8 ppg Class G 1.17 ft/sk
Total: 360 sx

Wasatch "G": 4016/3793

8 3/4" Hole

OHIO CREEK (Top KmV) 6621' / 6210'

Ohio Creek: 6208/5837
(Top of Mesa Verde)

7 7/8" Hole

WILLIAMS FORK FM 7168' / 6725'

Williams Fork: 7279/6836

TOP GAS 8349' / 7872'
TOC: 4200

Permit TOC 500 > TOG

Top Gas: 8355/7871

COASTAL /

COAL RIDGE (Paludal) /

ROLLINS SS (Hes Fm) 10341' / 9863'

ANTICIPATED TD /
PERMIT TD /

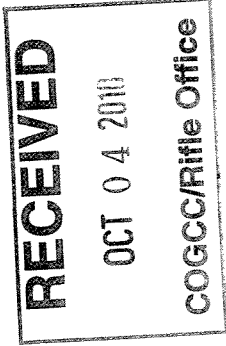
4-1/2", 11.6#, N80 Production Casing @ 10,467'
Cement with:
Lead: 486ss, 12 ppg TXL 1.79 cu-ft/ssx
Tail: 432 ssx, 13 ppg, 1.43 cu-ft/ssx
Total: 918 sx

Coal Ridge (Paludal): 9628/9144

Rollins: 10283/9799

Estimated TD @ 10433/9949
Permit TD @ 10583/10099

4-1/2", 11.6#, P110 / 180 Production Casing @ 10583'
Cement with:
(Permit TOC = 500 > TOG



Well: GMR 8-5B1
Pad: K8W
API No: 50451914500
Permit No:

Bradenhead Pressure Report Following Primary Cement Job

Date Cemented: 07/29/2010
Plug Bumped: 10:15 AM

Annular Fluid Level After Job (Static or Falling?): **STATIC**
If falling, barrels of mud added until stabilized: --- barrels

WOC Time: 6hrs Temp Log was ran
Bond Log Run: Temp log

Casing Slips Set: yes

Bradenhead Pressures

| | |
|---------|--------|
| 6 hrs: | 0 psig |
| 12 hrs: | 0 psig |
| 24 hrs: | 0 psig |
| 48 hrs: | 0 psig |
| 72 hrs: | 0 psig |

TOC 5200'
KK

Comments