

**FORM
5**Rev
02/08State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400101609

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

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 ST STE 1700

Fax: (720) 876-4070

City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-18996-00

6. County: GARFIELD

7. Well Name: Story Gulch Unit

Well Number: 8501A-36 B36496

8. Location: QtrQtr: Lot 2 Section: 36 Township: 4S Range: 96W Meridian: 6

Footage at surface: Direction: FNL Distance: 652 Direction: FEL Distance: 1583

As Drilled Latitude: 39.664267 As Drilled Longitude: -108.113300

GPS Data:

Data of Measurement: 03/08/2010 PDOP Reading: 2.0 GPS Instrument Operator's Name: Brian Baker

** If directional footage

at Top of Prod. Zone Distance: 45 Direction: FNL Distance: 1089 Direction: FEL

Sec: 36 Twp: 4S Rng: 96W

at Bottom Hole Distance: 93 Direction: FNL Distance: 1096 Direction: FEL

Sec: 36 Twp: 4S Rng: 96W

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number: COC65557

12. Spud Date: (when the 1st bit hit the dirt) 03/13/2010 13. Date TD: 05/13/2010 14. Date Casing Set or D&A: 06/15/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 12285 TVD 12245 17 Plug Back Total Depth MD 12226 TVD 12183

18. Elevations GR 8351 KB 8374

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

RST and Isolation scanner

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	30	20		102	232	120	0
SURF	14	9.625		3,118	1,222	3,118	0
2ND	8	4.5		12,275	1,381	12,275	3,635

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	8,300	12,148	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	12,149	12,285	<input type="checkbox"/>	<input type="checkbox"/>	

Comment: _____

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

Signed: _____ Print Name: Heather Mitchell

Title: Regulatory Analyst Date: _____ Email: heather.mitchell@encana.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name	Doc Description
400101625	LAS-	B7W1-00060_SGU_8501A-36B36_496_MAIN_RST_PSP_024PUP.las
400101627	PDS-	BCVF-00031_ENCANA_SGU_8501A-36_IBC_TD.pds
400101631		8501A-36 B36 496 Final Directional Survey.pdf
400101632		Surface Cement Tickets.pdf

Total Attach: 4 Files