



02054591



**State of Colorado
Oil and Gas Conservation Commission**

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

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		Complete the Attachment Checklist	
2. Name of Operator:	ENCANA OIL & GAS (USA) INC	DeAnne Spector			
3. Address:	370 17TH ST, STE 1700	Phone:	720-876-5826		
City:	DENVER	State:	CO		
		Zip:	80202		
5. API Number	05-045-18537	OGCC Facility ID Number		Survey Plat	
6. Well/Facility Name:	Daybreak Federal	7. Well/Facility Number	30-128B (PL30)	Directional Survey	X
8. Location (Qtr/Ctr, Sec, Twp, Rng, Meridian):	NWSW Sec. 30-T7S-R9SW, 6th PM			Surface Eqpm Diagram	
9. County:	Garfield	10. Field Name:	Parachute	Technical Info Page	X
11. Federal, Indian or State Lease Number:	N/A			Other	

General Notice

<input type="checkbox"/> CHANGE OF LOCATION:			Attach New Survey Plat	(a change of surface qtr/qtr is substantive and requires a new permit)
			FNUFSL	FELFWL
Change of Surface Footage from Exterior Section Lines;			<input type="text"/>	<input type="text"/>
Change of Surface Footage to Exterior Section Lines;			<input type="text"/>	<input type="text"/>
Change of Bottomhole Footage from Exterior Section Lines;			<input type="text"/>	<input type="text"/>
Change of Bottomhole Footage to Exterior Section Lines;			<input type="text"/>	<input type="text"/>
Bottomhole 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 _____				
GPS DATA:				
Date of Measurement _____	PDOOP Reading _____	Note _____	Instrument Operator's Name Ted I. Taggart	
<input type="checkbox"/> CHANGE SPACING UNIT		<input type="checkbox"/> Remove from surface bond Signed surface use agreement attached		
Formation <input type="text"/>	Spacing order number <input type="text"/>	Unit Acreage <input type="text"/>	Unit configuration <input type="text"/>	
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):		<input type="checkbox"/> CHANGE WELL NAME NUMBER		
Effective Date: _____ From: _____ To: _____ Effective Date: _____				
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual				
<input type="checkbox"/> ABANDONED LOCATION:		<input type="checkbox"/> 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 _____		
<input type="checkbox"/> SUD DATE: _____		<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (<i>5 mos from date casing set</i>)		
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK		Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date		
<input type="checkbox"/> 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. <input type="checkbox"/>		

Technical Engineering/Environmental Notice

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

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

Signed: Deanne Spector Date: 10/13/10 Email: deanne.spector@encana.com

Print Name: DeAnne Spector Title: Regulatory Analyst

COGCC Approved:

Date: 10/21/2010

CONDITIONS OF APPROVAL, IF ANY:



FOR OSGCC USE ONLY

1. Operator Number:	100185	API Number:	05-045-18537
2. Name of Operator:	ENCANA OIL & GAS (USA) INC.		
3. Well Name:	Daybreak Federal	Well Number:	30-12BB (PL30)
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NWSW Sec. 30-17S-R9SW, 6th PM		

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.

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DESCRIBE PROPOSED OR COMPLETED OPERATIONS

ENCANA OIL & GAS (USA) INC. requests a variance to the Surface Casing depth. We want to change the surface casing depth from 750' to 1030' md.

A revised directional survey is attached.

RECEIVED
OCT 14 2010
COGCC/Rifle Office