

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
2. Name Of Operator: EnCana Oil & Gas (USA) Inc.
3. Address: 370 17th Street, Suite 1700
City: Denver State: CO Zip: 80202
5. API Number: 05045107030000
6. Well/Facility Name: N Parachute EF15B A28 S95
7. Well/Facility Number: 15B A28 S95
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NE/NE Sec 28 T5S - R95W 6th PM
9. County: GARFIELD
10. Field Name: Wildcat
11. Federal, Indian or State Lease Number:

4. Contact Name:
HEATHER MITCHELL
Phone: 720-876-3070
Fax: 720-876-4070

Complete the Attachment Checklist

Survey Plat
Directional Survey
Surface Eqpm't Diagram
Technical Info Page
Other

General Notice

(a change of surface qtr/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

attach directional survey

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

GPS DATA:

Date of Measurement PDOP Reading

CHANGE SPACING UNIT

Formation Formation Code Spacing order number Unit Acreage Unit configuration

Instrument Operator's Name

Remove from surface bond
Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):

Effective Date:

Plugging Bond: Blanket Individual

CHANGE WELL NAME

From:

To:

Effective Date:

NUMBER

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

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

*submit cbl and cement job summaries

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:

Report of Work Done

Date Work Completed: 09/30/2010

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

Intent To Recomplete (submit form 2)
Change Drilling Plans
Gross Interval Changed?
Casing/Cementing Program Change

Request to Vent or Flare
Repair Well
Rule 502 variance requested
Other:

E&P Waste Disposal
Beneficial Reuse of E&P Waste
Status Update/Change of Remediation Plans 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:

Date: 10/18/2010

Email: Heather.Mitchell@encana.com

Print Name: HEATHER MITCHELL

Title: REGULATORY ANALYST

COGCC Approved:

Title:

Date:

CONDITIONS OF APPROVAL IF ANY:

12/6/2010

01241813

DE ET OF ES



RECEIVED
OCT 18 2010
COGCC/Rifle Office



TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY

RECEIVED
OCT 18 2010
COGCC/Rifle Office

- | | | | |
|--|--------------------------------|-----------------------|---------------|
| 1. OGCC Operator Number: | 100185 | API Number: | 0504510703000 |
| 2. Name of Operator: | Encana Oil & Gas (USA) Inc | OGCC Facility ID # | 15B A28 595 |
| 3. Well/Facility Name: | N Parachute EF 15B A28 595 | Well/Facility Number: | 15B A28 595 |
| 4. Location (OrOrt. Sec. Twp. Rng. Meridian) | NE1/4E Sec 28 T15S R05W 5th 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.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

A gas lift was installed on the above reference well on 09/30/2010