

FORM  
5Rev  
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:

400124139

## 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: Judith Walter

2. Name of Operator: ENCANA OIL &amp; GAS (USA) INC

Phone: (720) 876-3702

3. Address: 370 17TH ST STE 1700

Fax: (720) 876-4702

City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-19087-00

6. County: GARFIELD

7. Well Name: Story Gulch Unit

Well Number: 8505C-25 F25496

8. Location: QtrQtr: SENW Section: 25 Township: 4S Range: 96W Meridian: 6

Footage at surface: Distance: 2321 feet Direction: FNL Distance: 1859 feet Direction: FWL

As Drilled Latitude: 39.674195 As Drilled Longitude: -108.119932

## GPS Data:

Data of Measurement: 03/08/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brian Baker

## \*\* If directional footage

at Top of Prod. Zone Distance: 2203 feet Direction: FNL Distance: 696 feet Direction: FWL

Sec: 25 Twp: 4S Rng: 96W

at Bottom Hole Distance: 2214 feet Direction: FNL Distance: 682 feet Direction: FWL

Sec: 25 Twp: 4S Rng: 96W

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number: COC61136

12. Spud Date: (when the 1st bit hit the dirt) 04/01/2010 13. Date TD: 06/10/2010 14. Date Casing Set or D&amp;A: 06/11/2010

## 15. Well Classification:

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

16. Total Depth MD 12265 TVD 12177 17 Plug Back Total Depth MD 12202 TVD 12114

18. Elevations GR 8298 KB 8320

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 IBC-Isolation Scanner Cement Bond Log

## 20. Casing, Liner and Cement:

### CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Lin Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	20	53	0	120	207	0	120	CALC
SURF	14+3/4	9+5/8	36	0	3,022	1,109	0	3,022	CALC
1ST	8+3/4	4+1/2	11.6	0	12,240	1,774	1,380	12,240	CBL

### ADDITIONAL CEMENT

Cement work date: \_\_\_\_\_

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	8,263	12,222	<input type="checkbox"/>	<input type="checkbox"/>	TOP OF GAS @ 8729'
ROLLINS	12,223	12,265	<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: Judith Walter

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: judith.walter@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
400124215	PDF-NEUTRON
400124216	PDF-CEMENT BOND
400124218	CEMENT JOB SUMMARY
400124219	DIRECTIONAL SURVEY

Total Attach: 4 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)