

FORM
5
Rev
02/08

State 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

DRILLING COMPLETION REPORT

Document Number:

400124577

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 & 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 05-045-19145-00 6. County: GARFIELD
7. Well Name: GMR Well Number: 8-5B1 (K8W)
8. Location: QtrQtr: NESW Section: 8 Township: 7S Range: 93W Meridian: 6
Footage at surface: Distance: 1961 feet Direction: FSL Distance: 1924 feet Direction: FWL
As Drilled Latitude: 39.458209 As Drilled Longitude: -107.799903

GPS Data:

Data of Measurement: 10/08/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brandon Birdsall

** If directional footage

at Top of Prod. Zone Distance: 1460 feet Direction: FNL Distance: 150 feet Direction: FWL
Sec: 8 Twp: 7S Rng: 93W
at Bottom Hole Distance: 1460 feet Direction: FNL Distance: 34 feet Direction: FWL
Sec: 8 Twp: 7S Rng: 93W

9. Field Name: RULISON 10. Field Number: 75400

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 07/08/2010 13. Date TD: 07/28/2010 14. Date Casing Set or D&A: 07/29/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 10482 TVD 10004 17 Plug Back Total Depth MD 10423 TVD 9945

18. Elevations GR 7826 KB 7848

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 CBL logs.

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	26	26	Linepipe	0	41	40	0	40	CALC
SURF	12+1/4	9+5/8	36	0	1,303	360	0	1,313	CALC
1ST	7+7/8	4+1/2	11.6	0	10,467	918	5,260	10,467	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	7,168	10,340	<input type="checkbox"/>	<input type="checkbox"/>	Top of Gas @ 8349'
ROLLINS	10,341	10,482	<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
400124579	PDS-NEUTRON
400124580	PDS-CEMENT BOND
400124581	DIRECTIONAL SURVEY
400124582	CEMENT JOB SUMMARY

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)