

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:

2554384

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: SHEILLA REED-HIGH  
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3678  
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4678  
City: DENVER State: CO Zip: 80202-56

5. API Number 05-123-30611-00 6. County: WELD  
7. Well Name: RAY NELSON Well Number: 34-32  
8. Location: QtrQtr: SWSE Section: 32 Township: 2N Range: 68W Meridian: 6  
Footage at surface: Distance: 816 feet Direction: FSL Distance: 1688 feet Direction: FEL  
As Drilled Latitude: 40.089970 As Drilled Longitude: -105.023720

GPS Data:

Data of Measurement: 05/03/2010 PDOP Reading: 2.1 GPS Instrument Operator's Name: ROB TOMAS

\*\* If directional footage

at Top of Prod. Zone Distance: 592 feet Direction: FSL Distance: 2041 feet Direction: FEL  
Sec: 32 Twp: 2N Rng: 68W  
at Bottom Hole Distance: 626 feet Direction: FSL Distance: 2027 feet Direction: FEL  
Sec: 32 Twp: 2N Rng: 68W

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 03/03/2010 13. Date TD: 03/07/2010 14. Date Casing Set or D&A: 03/08/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8290 TVD 8248 17 Plug Back Total Depth MD 8220 TVD 8178

18. Elevations GR 4980 KB 4995

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:

CBL

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8		0	857	305	0	857	CALC
1ST	7+7/8	4+1/2		0	8,275	550	3,470	8,275	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	
SHANNON	4,980		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,390		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,702		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,132		<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: SHEILLA REED-HIGH

Title: OPERATIONS Date: 5/19/2010 Email: SHEILLA.REEDHIGH@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: David S. Nashin Director of COGCC Date: 2/17/2011

**Attachment Check List**

Att Doc Num	Name
2071917	DIRECTIONAL SURVEY
2554382	DIRECTIONAL SURVEY
2554383	CEMENT JOB SUMMARY
2554384	FORM 5 SUBMITTED

Total Attach: 4 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)