

FORM  
5Rev  
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
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Document Number:

400166951

## 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

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

3. Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-

4. Contact Name: Marina Ayala

Phone: (720) 876-3663

Fax: (720) 876-4663

5. API Number 05-045-14996-00

6. County: GARFIELD

7. Well Name: N. Parachute

Well Number: MF07C E09 696

8. Location: QtrQtr: SWNW Section: 9 Township: 6S Range: 96W Meridian: 6

Footage at surface: Distance: 2674 feet Direction: FNL Distance: 773 feet Direction: FWL

As Drilled Latitude: 39.539378 As Drilled Longitude: -108.118470

## GPS Data:

Data of Measurement: 09/09/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brian Baker

## \*\* If directional footage

at Top of Prod. Zone Distance: 2191 feet Direction: FNL Distance: 1670 feet Direction: FEL

Sec: 9 Twp: 6S Rng: 96W

at Bottom Hole Distance: 2180 feet Direction: FNL Distance: 1556 feet Direction: FEL

Sec: 9 Twp: 6S Rng: 96W

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/25/2010 13. Date TD: 12/24/2010 14. Date Casing Set or D&amp;A: 12/26/2010

## 15. Well Classification:

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

16. Total Depth MD 9060 TVD 7872 17 Plug Back Total Depth MD 9016 TVD 7828

18. Elevations GR 5752 KB 5782

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:

Mud and Triple Combo

## 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
CONDUCTOR	26	16	42	0	160	189	0	160	CALC
SURF	12+1/4	9+5/8	36	0	1,533	353	0	1,533	CALC
1ST	8+3/4	4+1/2	12	0	9,041	1,309	2,242	9,041	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	5,453	8,910	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,910	9,060	<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: Marina Ayala

Title: Permitting Technician Date: \_\_\_\_\_ Email: marina.ayala@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
400166981	PDF-MUD
400166982	LAS-TRIPLE COMBINATION
400166990	DIRECTIONAL SURVEY
400166991	CEMENT JOB SUMMARY

Total Attach: 4 Files

### **General Comments**

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

Total: 0 comment(s)