

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

Document Number:
400167971

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 & 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 05-045-19157-00
6. County: GARFIELD
7. Well Name: Story Gulch Unit
Well Number: 8506C-25 F25496
8. Location: QtrQtr: SENW Section: 25 Township: 4S Range: 96W Meridian: 6
Footage at surface: Distance: 2282 feet Direction: FNL Distance: 1934 feet Direction: FWL
As Drilled Latitude: 39.674301 As Drilled Longitude: -108.119666

GPS Data:

Data of Measurement: 03/08/2010 PDOP Reading: 1.3 GPS Instrument Operator's Name: Brian Baker

** If directional footage

at Top of Prod. Zone Distance: 2066 feet Direction: FNL Distance: 1920 feet Direction: FWL
Sec: 25 Twp: 4S Rng: 96W
at Bottom Hole Distance: 2104 feet Direction: FNL Distance: 1903 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) 05/06/2010 13. Date TD: 12/04/2010 14. Date Casing Set or D&A: 12/06/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 12325 TVD 12160 17 Plug Back Total Depth MD 12272 TVD 12107

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:

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	30	20	53	0	120	207	0	120	CALC
SURF	14+3/4	9+5/8	36	0	1,109	3,028	0	3,028	CALC
1ST	8+3/4	4+1/2	12	0	12,298	2,186	4,112	12,325	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	8,133	12,127	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	12,127	12,325	<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
400167992	PDF-MUD
400167993	LAS-TRIPLE COMBINATION
400167997	DIRECTIONAL SURVEY
400167998	CEMENT JOB SUMMARY

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)