

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:
400172253

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: SHEILLA REED-HIGH
Phone: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-014-20699-00
6. County: BROOMFIELD
7. Well Name: STIPANOVICH Well Number: 8-0-27
8. Location: QtrQtr: NENE Section: 27 Township: 1N Range: 68W Meridian: 6
Footage at surface: Distance: 441 feet Direction: FNL Distance: 802 feet Direction: FEL
As Drilled Latitude: 40.028207 As Drilled Longitude: -104.982966

GPS Data:
Data of Measurement: 12/07/2010 PDOP Reading: 3.1 GPS Instrument Operator's Name: PAT LINDERHOLM

** If directional footage
at Top of Prod. Zone Distance: 44 feet Direction: FNL Distance: 66 feet Direction: FEL
Sec: 27 Twp: 1N Rng: 68W
at Bottom Hole Distance: 36 feet Direction: FNL Distance: 62 feet Direction: FEL
Sec: 27 Twp: 1N Rng: 68W

9. Field Name: SPINDLE 10. Field Number: 77900
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 11/17/2010 13. Date TD: 11/23/2010 14. Date Casing Set or D&A: 11/24/2010

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 8652 TVD 8561 17 Plug Back Total Depth MD 8580 TVD 8489

18. Elevations GR 5179 KB 5192
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, IND/DEN/NEU

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	1,138	422	0	1,138	CALC
1ST	7+7/8	4+1/2		0	8,635	714	4,300	8,635	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	
SUSSEX	4,896		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,590		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	8,022		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,470		<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: OPS TECH Date: 3/4/2011 Email: _____

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

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)