

FORM
5A
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



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Document Number:

400148646

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of 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: 80202-56
4. Contact Name: Judith Walter
Phone: (720) 876-3702
Fax: (720) 876-4702

5. API Number 05-103-10343-00
6. County: RIO BLANCO
7. Well Name: HELLS HOLE
Well Number: 9139x
8. Location: QtrQtr: NENE Section: 18 Township: 2S Range: 103W Meridian: 6
9. Field Name: HELLS HOLE CANYON Field Code: 34175

Completed Interval

FORMATION: <u>DAKOTA</u>	Status: <u>SHUT IN</u>
Treatment Date: _____	Date of First Production this formation: _____
Perforations Top: <u>7107</u> Bottom: <u>7181</u>	No. Holes: <u>51</u> Hole size: <u>0.43</u>
Provide a brief summary of the formation treatment: _____	Open Hole: <input type="checkbox"/>
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:	
Date: <u>09/17/2003</u> Hours: <u>24</u>	Bbls oil: <u>0</u> Mcf Gas: <u>147</u> Bbls H2O: <u>8</u>
Calculated 24 hour rate:	Bbls oil: <u>0</u> Mcf Gas: <u>147</u> Bbls H2O: <u>8</u> GOR: _____
Test Method: <u>Flowing</u>	Casing PSI: <u>239</u> Tubing PSI: <u>200</u> Choke Size: _____
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u> BTU Gas: <u>1170</u> API Gravity Oil: <u>0</u>
Tubing Size: <u>2 + 3/8</u> Tubing Setting Depth: <u>7108</u>	Tbg setting date: <u>09/10/2003</u> Packer Depth: _____
Reason for Non-Production: _____	
Date formation Abandoned: <u>02/08/2011</u> Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____	
Bridge Plug Depth: <u>5100</u>	Sacks cement on top: <u>3</u>

FORMATION: <u>MANCOS</u>		Status: <u>SHUT IN</u>	
Treatment Date: <u>07/28/2005</u>		Date of First Production this formation: <u>08/10/2005</u>	
Perforations	Top: <u>5224</u>	Bottom: <u>7058</u>	No. Holes: <u>1432</u> Hole size: <u> </u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
<div style="border: 1px solid black; padding: 2px;">Treated w/34, 1 3/8" x 5" PFS Propellant Cartridges</div>			
This formation is commingled with another formation:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:			
Date: <u>08/22/2005</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>2</u> Bbls H2O: <u>0</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>2</u> Bbls H2O: <u>0</u> GOR: <u> </u>
Test Method: <u>Flowing</u>	Casing PSI: <u>101</u>	Tubing PSI: <u>96</u>	Choke Size: <u>64/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1170</u>	API Gravity Oil: <u>0</u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>6224</u>	Tbg setting date: <u>08/04/2005</u>	Packer Depth: <u> </u>
Reason for Non-Production:			
<div style="border: 1px solid black; padding: 2px;">Testing Productin up-hole, we consider this Mancos formation Shut In when the</div>			
Date formation Abandoned: <u>02/08/2011</u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u> </u>
Bridge Plug Depth: <u>5100</u>		Sacks cement on top: <u>3</u>	

FORMATION: <u>MANCOS B</u>		Status: <u>PRODUCING</u>	
Treatment Date: <u>02/25/2011</u>		Date of First Production this formation: <u>03/10/2011</u>	
Perforations	Top: <u>4162</u>	Bottom: <u>4419</u>	No. Holes: <u>22</u> Hole size: <u>0.37</u>
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>	
<div style="border: 1px solid black; padding: 2px;">Stages R1 treated with a total of: 2326 bbls of Lightning 16, 77890 lbs 20-40 Sand, 93883 lbs 20-40 Super LC, 20/40.</div>			
This formation is commingled with another formation:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:			
Date: <u>03/27/2011</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>427</u> Bbls H2O: <u>167</u>
Calculated 24 hour rate:		Bbls oil: <u>0</u>	Mcf Gas: <u>427</u> Bbls H2O: <u>167</u> GOR: <u> </u>
Test Method: <u>Flowing</u>	Casing PSI: <u>60</u>	Tubing PSI: <u>150</u>	Choke Size: <u>64/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1170</u>	API Gravity Oil: <u>0</u>
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>4557</u>	Tbg setting date: <u>03/14/2011</u>	Packer Depth: <u> </u>
Reason for Non-Production:			
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
Date formation Abandoned: <u> </u>		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt <u> </u>
Bridge Plug Depth: <u> </u>		Sacks cement on top: <u> </u>	

Comment:

3/27/11 Flow Test Date: the well is on pumping unit lifting wtr up tbg flowing gas up csg. Encana Oil & Gas (USA) Inc. request that this well information be set to "Confidential Status"

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: 3/31/2011

Email judith.walter@encana.co,
:

Attachment Check List

Att Doc Num	Name
400148646	FORM 5A SUBMITTED
400148647	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)