

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

COMPLETED INTERVAL REPORT

Document Number: 2588593

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-
4. Contact Name: SHEILLA REED-HIGH
Phone: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-014-20710-00
6. County: BROOMFIELD
7. Well Name: SEARS
Well Number: 0-4-26
8. Location: QtrQtr: SWNW Section: 26 Township: 1N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 06/23/2011 Date of First Production this formation:
Perforations Top: 76588542 Bottom: 196 No. Holes: 196 Hole size:

Provide a brief summary of the formation treatment: Open Hole: []

JSND-NBRR-CDL COMMINGLE. SET CBP @7610. 07/18/2011. DRILLED OUT CBP @ 7610', CFP @ 7950', 8190' TO COMMINGLE THE JSND-NBRR-CDL. 07/19/2011.

This formation is commingled with another formation: [] Yes [X] No

Test Information:
Date: 07/23/2011 Hours: 24 Bbls oil: 130 Mcf Gas: 350 Bbls H2O: 35
Calculated 24 hour rate: Bbls oil: 130 Mcf Gas: 350 Bbls H2O: 35 GOR: 2692
Test Method: FLOWING Casing PSI: 1818 Tubing PSI: 895 Choke Size:
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1219 API Gravity Oil: 50
Tubing Size: 2 + 3/8 Tubing Setting Depth: 8499 Tbg setting date: 07/19/2011 Packer Depth:
Reason for Non-Production:

Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

FORMATION: J SAND Status: PRODUCING

Treatment Date: 06/23/2011 Date of First Production this formation: _____

Perforations Top: 8526 Bottom: 8542 No. Holes: 32 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

J SAND COMPLETION. FRAC'D THE J-SAND 8526'-8542'. (32 HOLES) W/151,158 GAL 18 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,600 # 20/40 SAND. 06/23/2011.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 06/22/2011 Date of First Production this formation: _____

Perforations Top: 7658 Bottom: 8090 No. Holes: 164 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

CDL-NBRR COMPLETION. SET CFP @ 8190'. 06/23/2011. FRAC'D THE CODELL 8072'-8090' (36 HOLES) W/108,948 GAL 22 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,580 # 20/40 SAND. 06/23/2011. SET CFP @ 7950'. 06/23/2011. FRAC'D THE NIOBRARA 7658'-7672', 7832'-7850' (128 HOLES) W/131,124 GALS 18 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,660 # 20/40 SAND. 06/23/2011.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

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

Attachment Check List

Att Doc Num	Name
2588593	FORM 5A SUBMITTED
2588594	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)