



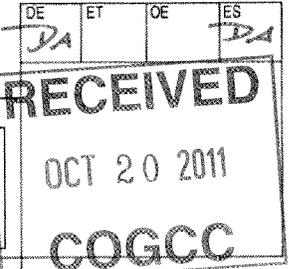
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FORM 4 Rev 12/05

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State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number : 100185 4. Contact Name : RUTHANN MORSS
2. Name Of Operator : EnCana Oil & Gas (USA) Inc. Phone : 720-876-5060
3. Address : 370 17th Street, Suite 1700 City : Denver State : CO Zip : 80202 Fax : 720-876-6060
5. API Number : 05045147290000 OGCC Facility ID Number
6. Well/Facility Name : Map LLC 7. Well/Facility Number : 11-12BB (PK11)
8. Location (QtrQtr, Sec, Twp, Rng, Meridian) : NESW Sec 11 T7S - R95W 6th PM
9. County : GARFIELD 10. Field Name : Parachute
11. Federal, Indian or State Lease Number :

Table with columns: Survey Plat, Directional Survey, Surface Eqprnt Diagram, Technical Info Page, Other. Includes checkboxes and labels OP, OGCC.

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)
CHANGE SPACING UNIT
CHANGE OF OPERATOR (prior to drilling):
ABANDONED LOCATION:
SPUD DATE:
SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK
RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.

Technical Engineering/Environmental Notice

Notice of Intent
Approximate Start Date : 10/22/2011
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)
Intent To Recomplete (submit form 2)
Request to Vent or Flare
E&P Waste Disposal

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: Ruthann Morss Date: 10/20/2011 Email: ruthann.morss@encana.com
Print Name: RUTHANN MORSS Title: REGULATORY ANALYST

COGCC Approved: [Signature] Title: PE II Date: 10/24/2011
CONDITIONS OF APPROVAL, IF ANY:

