

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:

400215974

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: Heather Mitchell  
Phone: (720) 876-3070  
Fax: (720) 876-4070

5. API Number 05-045-18880-00  
6. County: GARFIELD  
7. Well Name: N. Parachute  
Well Number: WF11A-22 K22 59  
8. Location: QtrQtr: NESW Section: 22 Township: 5S Range: 96W Meridian: 6  
Footage at surface: Distance: 2185 feet Direction: FSL Distance: 1789 feet Direction: FWL  
As Drilled Latitude: 39.599378 As Drilled Longitude: -108.158423

GPS Data:

Date of Measurement: 01/07/2010 PDOP Reading: 3.1 GPS Instrument Operator's Name: Ben Johnson

\*\* If directional footage at Top of Prod. Zone Dist.: 2491 feet. Direction: FSL Dist.: 1958 feet. Direction: FWL  
Sec: 22 Twp: 5S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 2484 feet. Direction: FSL Dist.: 1929 feet. Direction: FWL  
Sec: 22 Twp: 5S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/16/2010 13. Date TD: 10/13/2010 14. Date Casing Set or D&A: 10/14/2010

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 8950 TVD\*\* 8917 17 Plug Back Total Depth MD 8905 TVD\*\* 8872

18. Elevations GR 6533 KB 6555

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:

RST, CBL & Mud

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	26	16	Line pipe	0	120	273	0	120	CALC
SURF	12+1/4	9+5/8	36	0	1,693	551	0	1,880	CALC
2ND	7+3/4	4+1/2	12	0	8,934	1,291	1,278	8,950	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

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	5,295	8,794	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,795	8,917	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

RST & CBL in the same file. TOG 5454

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

Signed: \_\_\_\_\_ Print Name: Heather Mitchell

Title: Regulatory Analyst Date: 10/18/2011 Email: heather.mitchell@encana.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
400215980	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400215979	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400215978	Other	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b><u>Other Attachments</u></b>			
400215974	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400215975	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REC LOGS DOC#1671149-51, IN SCANNING	10/21/2011 8:42:49 AM
Permit	WAITING ON DIGITAL AND HARD COPY LOGS	10/19/2011 3:18:56 PM

Total: 2 comment(s)