

**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:

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**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

4. Contact Name: Marina Ayala

2. Name of Operator: ENCANA OIL &amp; GAS (USA) INC

Phone: (720) 876-5905

3. Address: 370 17TH ST STE 1700

Fax: (720) 876-6905

City: DENVER State: CO Zip: 80202-

5. API Number 05-045-20206-00

6. County: GARFIELD

7. Well Name: KEINATH FEDERAL

Well Number: 9-14H (C10OU)

8. Location: QtrQtr: NENW Section: 10 Township: 8S Range: 96W Meridian: 6

Footage at surface: Distance: 1045 feet Direction: FNL Distance: 1544 feet Direction: FWL

As Drilled Latitude: 39.368586 As Drilled Longitude: -108.099265

## GPS Data:

Data of Measurement: 08/09/2011 PDOP Reading: 2.2 GPS Instrument Operator's Name: Brandon Birdsall

\*\* If directional footage at Top of Prod. Zone Dist.: 1794 feet. Direction: FNL Dist.: 2328 feet. Direction: FWL

Sec: 10 Twp: 8S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 1385 feet. Direction: FSL Dist.: 2677 feet. Direction: FEL

Sec: 9 Twp: 8S Rng: 96W

9. Field Name: GRAND VALLEY

10. Field Number: 31290

11. Federal, Indian or State Lease Number: COC58674

12. Spud Date: (when the 1st bit hit the dirt) 02/14/2011 13. Date TD: 07/31/2011 14. Date Casing Set or D&amp;A: 08/02/2011

## 15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 14225 TVD\*\* 8759 17 Plug Back Total Depth MD 14068 TVD\*\* 8763

18. Elevations GR 5568 KB 5590

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 (combo) and 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	30	20	53	0	40	40	0	40	CALC
SURF	14+3/4	10+3/4	40.5	0	1,532	870	0	1,532	CALC
1ST	9+7/8	7+5/8	29.70	0	7,898	1,010	3,060	7,950	CALC
2ND	6+1/2	5	23.20	0	14,197	584	2,960	14,225	CBL

### STAGE/TOP OUT/REMEDIAL CEMENT

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

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	3,016	117	1,210	3,060

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	
ROLLINS	4,497	5,277	<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	5,278	5,531	<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	5,532	6,900	<input type="checkbox"/>	<input type="checkbox"/>	
CASTLEGATE	6,901	7,105	<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	7,106	8,439	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	8,440	14,225	<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: Marina Ayala

Title: Permitting Technician Date: \_\_\_\_\_ Email: marina.ayala@encana.com

The subreport 'subreport3' could not be found at the specified location W:\Inetpub\Net\Reports\AttachListNew.rdlc. Please

### General Comments

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

Total: 0 comment(s)