

**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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COMPLETED INTERVAL REPORT

Document Number:

2285225

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: <u>100185</u>	4. Contact Name: <u>SHEILLA REED-HIGH</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-3678</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-4678</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-30811-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>KUNER</u>	Well Number: <u>8-2-25</u>
8. Location: QtrQtr: <u>SENE</u> Section: <u>25</u> Township: <u>5N</u> Range: <u>64W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: J SAND Status: PRODUCING

Treatment Date: 08/04/2011 Date of First Production this formation: 08/25/2011

Perforations Top: 7108 Bottom: 7150 No. Holes: 52 Hole size: _____

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

JSND COMPLETION. FRAC'D THE J-SAND 7136'-7150' AND 7108'-7120' (52 HOLES) W/65,478 GAL 18 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,000# 20/40 SAND. 08/04/11.

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/26/2011 Hours: 24 Bbls oil: 110 Mcf Gas: 309 Bbls H2O: 210

Calculated 24 hour rate: Bbls oil: 110 Mcf Gas: 309 Bbls H2O: 210 GOR: 2809

Test Method: FLOWING Casing PSI: 869 Tubing PSI: _____ Choke Size: 12/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1135 API Gravity Oil: 49

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: 08/04/2011 Date of First Production this formation: 08/25/2011

Perforations Top: 6370 Bottom: 6660 No. Holes: 232 Hole size: _____

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

CDL-NBRR COMPLETION. SET CFP @ 6710'. FRAC'D THE CODELL 6646'-6660'. (28 HOLES) W/90,497 GAL 22 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,060# 40/70 SAND. 08/04/2011. SET CFP @ 6540'. 08/04/2011. FRAC'D THE NIOBRARA 6370'-6390'. 6458'-6489' (204 HOLES) W/97,574 GALS 18 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,000# 40/70 SAND. 08/04/2011.

This formation is commingled with another formation: Yes No

Test Information:

Date: 08/26/2011 Hours: 24 Bbls oil: 110 Mcf Gas: 309 Bbls H2O: 210

Calculated 24 hour rate: Bbls oil: 110 Mcf Gas: 309 Bbls H2O: 210 GOR: 2809

Test Method: FLOWING Casing PSI: 869 Tubing PSI: _____ Choke Size: 12/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1135 API Gravity Oil: 49

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

Title: OPERATIONS

Date: 10/13/2011

Email: SHEILLA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Name
2285225	FORM 5A SUBMITTED
2285226	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)