

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 & 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 05-045-19047-00 6. County: GARFIELD  
 7. Well Name: N. PARACHUTE Well Number: WF04C-25H26596  
 8. Location: QtrQtr: SENE Section: 26 Township: 5S Range: 96W Meridian: 6  
 Footage at surface: Distance: 2460 feet Direction: FNL Distance: 641 feet Direction: FEL  
 As Drilled Latitude: 39.586640 As Drilled Longitude: -108.129635

GPS Data:  
Data of Measurement: 12/07/2011 PDOP Reading: 3.7 GPS Instrument Operator's Name: Brandon Birdsall

\*\* If directional footage at Top of Prod. Zone Dist.: 772 feet. Direction: FNL Dist.: 1277 feet. Direction: FWL  
Sec: 25 Twp: 5S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 733 feet. Direction: FNL Dist.: 1300 feet. Direction: FWL  
Sec: 25 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) 06/02/2011 13. Date TD: 10/05/2011 14. Date Casing Set or D&A: 10/06/2011

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 9800 TVD\*\* 9158 17 Plug Back Total Depth MD 9749 TVD\*\* 9107

18. Elevations GR 6094 KB 6116 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 (triple 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	26	16	42	0	178	225	0	180	CALC
SURF	12+1/4	9+5/8	36	0	1,706	383	0	1,706	CALC
1ST	8+3/4	4+1/2	12	0	9,778	1,340	1,500	9,800	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	5,950	9,637	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,638	9,800	<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

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**General Comments**

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

Total: 0 comment(s)