

FORM
5Rev
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:

2286642

Date Received:

01/10/2012

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: SHEILA REED-HIGH

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

Phone: (720) 876-3678

3. Address: 370 17TH ST STE 1700

Fax: (720) 876-4678

City: DENVER State: CO Zip: 80202-

5. API Number 05-014-20704-00

6. County: BROOMFIELD

7. Well Name: CRANDELL

Well Number: 23-26

8. Location: QtrQtr: NWSW Section: 26 Township: 1N Range: 68W Meridian: 6

Footage at surface: Distance: 1755 feet Direction: FSL Distance: 1008 feet Direction: FWL

As Drilled Latitude: 40.019719 As Drilled Longitude: -104.976553

GPS Data:

Date of Measurement: 11/22/2011 PDOP Reading: 3.2 GPS Instrument Operator's Name: ALEX LUNA

** If directional footage at Top of Prod. Zone Dist.: 2061 feet. Direction: FSL Dist.: 1973 feet. Direction: FWL

Sec: 26 Twp: 1N Rng: 68W

** If directional footage at Bottom Hole Dist.: 2077 feet. Direction: FSL Dist.: 1984 feet. Direction: FWL

Sec: 26 Twp: 1N Rng: 68W

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 10/29/2011 13. Date TD: 11/02/2011 14. Date Casing Set or D&A: 11/03/2011

15. Well Classification:

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

16. Total Depth MD 8715 TVD** 8589 17 Plug Back Total Depth MD 8668 TVD** 8542

18. Elevations GR 5217 KB 5230

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:

CBL, DUAL IND/COMPENSATED DENSITY, COMPENSATED NEUTRON

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
SURF	12+1/4	8+5/8		0	1,088	400	0	1,088	CALC
1ST	7+7/8	4+1/2		0	8,703	737	4,450	8,703	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	
SUSSEX	4,952		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,693		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	8,135		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,571		<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: SHEILA REED-HIGH
Title: DRILL & COMPL TECH	Date: 12/19/2011 Email: SHEILA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2286644	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2286643	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 type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
2286642	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400260711	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Received Directional Drilling template.	3/13/2012 10:28:56 AM
Permit	ON HOLD: requesting Directional Drilling template.	3/8/2012 1:50:33 PM

Total: 2 comment(s)