

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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Document Number:

400262345

Date Received:

COMPLETED INTERVAL REPORT

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: 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: Sheilla Reed-High
Phone: (720) 876-3678
Fax: (720) 876-4678

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
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 12/06/2011 Date of First Production this formation: 02/02/2012

Perforations Top: 8135 Bottom: 8154 No. Holes: 38 Hole size: 0.42

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

Set CFP @ 8200'. 12-06-11
Frac'd the Codell 8135' - 8154', (38 holes) w/ 88,788 gal 22 # Vistar Hybrid
cross linked gel containing 243,340 # 30/50 sand. 12-06-11

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

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: J-NIOBRARA-CODELLStatus: COMMINGLED

Treatment Date: _____

Date of First Production this formation: 02/02/2012Perforations Top: 7716 Bottom: 8586 No. Holes: 254 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set CBP @ 7630'. 01-30-12

Drilled out CBP @ 7630', CFP @ 7950', 8200' to commingle the JSND-NBRR-CDL. 01-31-12

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 02/10/2012 Hours: 24 Bbls oil: 96 Mcf Gas: 516 Bbls H2O: 161Calculated 24 hour rate: Bbls oil: 96 Mcf Gas: 516 Bbls H2O: 161 GOR: 5375Test Method: FLOWING Casing PSI: 1110 Tubing PSI: 271 Choke Size: 14Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1350 API Gravity Oil: 49Tubing Size: 2 + 3/8 Tubing Setting Depth: 8573 Tbg setting date: 01/31/2012 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: J SANDStatus: PRODUCINGTreatment Date: 12/05/2011Date of First Production this formation: 02/02/2012Perforations Top: 8586 Bottom: 8610 No. Holes: 48 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac'd the J-Sand 8586'- 8610', (48 holes) w/ 65,940 gal 18 # Vistar

Hybrid cross linked gel containing 255,876# 20/40 Sand. 12-05-11

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

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: 12/07/2011

Date of First Production this formation: 02/02/2012

Perforations Top: 7697 Bottom: 8154 No. Holes: 206 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

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

Status: COMMINGLED

Treatment Date: 12/07/2011

Date of First Production this formation: 02/02/2012

Perforations Top: 7697 Bottom: 7904 No. Holes: 168 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set CFP @ 7950'. 12-07-11
Frac'd the Niobrara 7697' – 7904' (168 holes), w/ 96,306 gals 18 # Vistar
Hybrid cross linked gel containing 251,160# 30/50 sand. 12-07-11

This formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

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: Drilling and Compl. Tech Date: _____ Email: sheilla.reedhigh@Encana.com

Attachment Check List

Att Doc Num	Name
400262346	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)