

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:

400262969

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 05-014-20701-00  
6. County: BROOMFIELD  
7. Well Name: CRANDELL  
Well Number: 2-8-26  
8. Location: QtrQtr: NWSW Section: 26 Township: 1N Range: 68W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: <u>CODELL</u>	Status: <u>COMMINGLED</u>
Treatment Date: <u>11/22/2011</u>	Date of First Production this formation: <u>02/17/2012</u>
Perforations Top: <u>8336</u> Bottom: <u>8352</u>	No. Holes: <u>32</u> Hole size: <u>0.42</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
Set CFP @ 8390'. 11-22-11 Frac'd the Codell 8336' - 8352', (32 holes) w/ 90,468 gal 22 # Vistar Hybrid cross linked gel containing 251,100 # 30/50 sand. 11-22-11	
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Test Information:</b>	
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: <input type="checkbox"/> Yes <input type="checkbox"/> 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: 02/17/2012Perforations Top: 7920 Bottom: 8778 No. Holes: 258 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set CBP 7860'. 02-15-12

Drilled out CBP @ 7860', CFP @ 8150', CFP @ 8390' to commingle the JSND-NBRR-CDL. 02-16-12

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 02/19/2012 Hours: 24 Bbls oil: 92 Mcf Gas: 808 Bbls H2O: 140Calculated 24 hour rate: Bbls oil: 92 Mcf Gas: 808 Bbls H2O: 140 GOR: 8783Test Method: FLOWING Casing PSI: 1374 Tubing PSI: 808 Choke Size: 16/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1350 API Gravity Oil: 50Tubing Size: 2 + 3/8 Tubing Setting Depth: 8736 Tbg setting date: 02/16/2012 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: 11/22/2011Date of First Production this formation: 02/17/2012Perforations Top: 8757 Bottom: 8778 No. Holes: 42 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac'd the J-Sand 8757'- 8778', (42 holes) w/ 66,738 gal 18 # Vistar Hybrid cross linked gel containing 251,000# 20/40 Sand. 11-22-11

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: SOLD Gas Type: DRY 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: 11/22/2011

Date of First Production this formation: 02/17/2012

Perforations Top: 7920 Bottom: 8352 No. Holes: 216 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: 11/22/2011

Date of First Production this formation: 02/17/2012

Perforations Top: 7920 Bottom: 8114 No. Holes: 184 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set CFP @ 8150'. 11-22-11  
Frac'd the Niobrara 7920' – 8114' (184 holes), w/ 98,952 gals 18 # Vistar  
Hybrid cross linked gel containing 251,880# 30/50 sand. 11-22-11

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
400263255	WELLBORE DIAGRAM

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)