

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:

400263035

Date Received:

03/20/2012

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 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 05-045-18705-00 6. County: GARFIELD  
 7. Well Name: N. Parachute Well Number: MF06B-16 H17 69  
 8. Location: QtrQtr: SENE Section: 17 Township: 6S Range: 96W Meridian: 6  
 9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING

Treatment Date: 01/24/2012 Date of First Production this formation: 02/21/2012

Perforations Top: 4314 Bottom: 7351 No. Holes: 300 Hole size: 0.42

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

Stages 1-10 treated with a total of: 120,959 bbls of Slickwater.

This formation is commingled with another formation:  Yes  No

Test Information:

Date: 02/27/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 3530 Bbls H2O: 105

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 24 Mcf Gas: 3530 Bbls H2O: 105 GOR: 0

Test Method: Flowing Casing PSI: 1218 Tubing PSI: \_\_\_\_\_ Choke Size: 46/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1170 API Gravity Oil: 0

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: \_\_\_\_\_

Tubing not landed on this well. Encana will land tubing in 2012 a new 5A will be submitted.

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: 3/20/2012 Email: marina.ayala@encana.com

### Attachment Check List

Att Doc Num	Name
400263035	FORM 5A SUBMITTED
400263044	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold; form 5 approved.	3/22/2012 9:30:05 AM
Permit	on hold pending approval of form 5	3/20/2012 11:19:51 AM

Total: 2 comment(s)