

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:

400262680

Date Received:

03/20/2012

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
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: Marina Ayala
Phone: (720) 876-5905
Fax: (720) 876-6905

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
Footage at surface: Distance: 1548 feet Direction: FNL Distance: 292 feet Direction: FEL
As Drilled Latitude: 39.527413 As Drilled Longitude: -108.123541

GPS Data:
Date of Measurement: 09/09/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brian Baker

** If directional footage at Top of Prod. Zone Dist.: 1700 feet. Direction: FNL Dist.: 1329 feet. Direction: FWL
Sec: 16 Twp: 6S Rng: 96W

** If directional footage at Bottom Hole Dist.: 1720 feet. Direction: FNL Dist.: 1378 feet. Direction: FWL
Sec: 16 Twp: 6S 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) 02/05/2011 13. Date TD: 03/28/2011 14. Date Casing Set or D&A: 03/28/2011

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

16. Total Depth MD 7688 TVD** 7309 17 Plug Back Total Depth MD 7619 TVD** 7240

18. Elevations GR 5654 KB 5677
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 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	182	200	0	182	CALC
SURF	12+1/4	9+5/8	36	0	1,320	309	0	1,323	CALC
1ST	8+3/4	4+1/2	11.60	0	7,655	1,092	2,442	7,688	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	4,304	7,539	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	7,540	7,668	<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: 3/20/2012 Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400263031	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400263029	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
400262680	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400262693	LAS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400262991	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400263030	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold--EDR 2513481 CB/CB-VD/GR-CC 2513502 RST/SM/GR-CC 2513503 in scanning. oper. confirmed that GPS data predates spud due to measurement at time of cond. csg.	3/22/2012 9:26:32 AM
Permit	on hold pending receipt of paper logs. need statement about date of GPS info from oper.	3/20/2012 11:18:43 AM

Total: 2 comment(s)