

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400271379

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

4. Contact Name: Erin Hochstetler

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

Phone: (720) 876-5827

3. Address: 370 17TH ST STE 1700

Fax:

City: DENVER State: CO Zip: 80202-

5. API Number 05-045-15165-00

6. County: GARFIELD

7. Well Name: N. PARACHUTE

Well Number: CP 11B-21 G21 5

8. Location: QtrQtr: SWNE Section: 21 Township: 5S Range: 96W Meridian: 6

9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK

Status: PRODUCING

Treatment Date: 01/18/2012

Date of First Production this formation: 01/24/2012

Perforations Top: 6727 Bottom: 10059 No. Holes: 300 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Stages 01-10 treated with a total of: 104427 bbls of Slickwater.

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

Test Information:

Date: 03/24/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 1393 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 1393 Bbls H2O: 0 GOR: 0

Test Method: Flowing Casing PSI: 907 Tubing PSI: 345 Choke Size: 20

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

Tubing Size: 2.375 Tubing Setting Depth: 9692 Tbg setting date: 03/14/2012 Packer Depth: 0

Reason for Non-Production:

Date formation Abandoned: Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

Comment:

This is a new form 5A which is updated from the original filed 2/9/2012, document #400250350. Tubing was landed and new test information was taken.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed:

Print Name: Erin Hochstetler

Title: Permitting Technician

Date:

Email erin.hochstetler@encana.com

### Attachment Check List

Att Doc Num	Name
400271387	WELLBORE DIAGRAM

Total Attach: 1 Files

### General Comments

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

Total: 0 comment(s)