

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: Jane Washburn
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5431
3. Address: 370 17TH ST STE 1700 City: DENVER State: CO Zip: 80202- Fax: (720) 876-6431

5. API Number 05-123-16570-00 6. County: WELD
7. Well Name: ARISTOCRAT ANGUS Well Number: 12-4C
8. Location: QtrQtr: SWNW Section: 4 Township: 3N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 02/18/2012 End Date: 02/18/2012 Date of First Production this formation: 04/25/1993

Perforations Top: 7192 Bottom: 7208 No. Holes: 48 Hole size:

Provide a brief summary of the formation treatment: Open Hole: [ ]

Refrac'd 7192-7208 w/2682 bbls frac fluid and 250,560 # sand

This formation is commingled with another formation: [X] Yes [ ] No

Total fluid used in treatment (bbl): 2682 Max pressure during treatment (psi): 5308

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: Number of staged intervals: 1

Total acid used in treatment (bbl): 0 Max frac gradient (psi/ft): 0.95

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 36

Fresh water used in treatment (bbl): 2682 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 250560 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:

Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl 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: COMMINGLED Treatment Type: \_\_\_\_\_

Treatment Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Date of First Production this formation: 04/25/1993

Perforations Top: 6912 Bottom: 7208 No. Holes: 174 Hole size: \_\_\_\_\_

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

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): \_\_\_\_\_ Max pressure during treatment (psi): \_\_\_\_\_

Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): \_\_\_\_\_

Type of gas used in treatment: \_\_\_\_\_ Number of staged intervals: \_\_\_\_\_

Total acid used in treatment (bbl): \_\_\_\_\_ Max frac gradient (psi/ft): \_\_\_\_\_

Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): \_\_\_\_\_

Fresh water used in treatment (bbl): \_\_\_\_\_ Disposition method for flowback: \_\_\_\_\_

Total proppant used (lbs): \_\_\_\_\_ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

**Fracture stimulations must be reported on FracFocus.org**

**Test Information:**

Date: 04/08/2012 Hours: 24 Bbl oil: 2 Mcf Gas: 102 Bbl H2O: 6

Calculated 24 hour rate: Bbl oil: 2 Mcf Gas: 102 Bbl H2O: 6 GOR: 51000

Test Method: Flow Casing PSI: 324 Tubing PSI: 125 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1 API Gravity Oil: 64

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7179 Tbg setting date: 03/31/2012 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: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 03/16/2012 End Date: 03/16/2012 Date of First Production this formation: 04/25/1993  
Perforations Top: 6912 Bottom: 7120 No. Holes: 126 Hole size:

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

Re-frac'd 6912-7120 w/3087 bbls frac fluid and 252,080 # sand

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 3087 Max pressure during treatment (psi): 7055

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.34

Type of gas used in treatment: Number of staged intervals: 1

Total acid used in treatment (bbl): 0 Max frac gradient (psi/ft): 0.96

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 128

Fresh water used in treatment (bbl): 3087 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 252080 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

**Test Information:**

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:

Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl 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: Jane Washburn  
Title: Operations Technologist Date: Email jane.washburn@encana.com

**Attachment Check List**

| Att Doc Num | Name             |
|-------------|------------------|
| 400298504   | WELLBORE DIAGRAM |

Total Attach: 1 Files

**General Comments**

| User Group | Comment | Comment Date |
|------------|---------|--------------|
|            |         |              |

Total: 0 comment(s)