

FORM  
5Rev  
02/08

## State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

1884163

Date Received:

05/20/2008

## 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

4. Contact Name: NICHOLAS RONAN

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

Phone: (303) 623-2300

3. Address: 370 17TH ST STE 1700

Fax: (303) 623-2400

City: DENVER State: CO Zip: 80202-

5. API Number 05-045-11867-00

6. County: GARFIELD

7. Well Name: N. PARACHUTE

Well Number: EF09D C28 595

8. Location: QtrQtr: NENW Section: 28 Township: 5S Range: 95W Meridian: 6

Footage at surface: Distance: 1239 feet Direction: FNL Distance: 2107 feet Direction: FWL

As Drilled Latitude: As Drilled Longitude:

## GPS Data:

Date of Measurement: PDOP Reading: GPS Instrument Operator's Name:

\*\* If directional footage at Top of Prod. Zone Dist.: 1265 feet. Direction: FSL Dist.: 544 feet. Direction: FEL

Sec: 20 Twp: 5S Rng: 95W

\*\* If directional footage at Bottom Hole Dist.: 1362 feet. Direction: FSL Dist.: 718 feet. Direction: FEL

Sec: 20 Twp: 5S Rng: 95W

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) 10/08/2007 13. Date TD: 11/03/2007 14. Date Casing Set or D&amp;A: 11/05/2007

## 15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 10925 TVD\*\* 9749 17 Plug Back Total Depth MD 10671 TVD\*\* 9495

18. Elevations GR 6168 KB 6190

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:

CBL, 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   | 24           | 16             |       | 0             | 120           |           | 0       | 120     | CALC   |
| SURF        | 12+1/4       | 9+5/8          |       | 0             | 2,504         | 480       | 0       | 2,504   | CALC   |
| 1ST         | 8+3/4        | 4+1/2          |       | 0             | 10,905        | 1,610     | 2,500   | 10,915  | CBL    |

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

| Method used | String | Cementing tool setting/perf 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  | 6,998          | 10,783 | <input type="checkbox"/> | <input type="checkbox"/> | AS DRILLED GPS WILL BE MAILED IN A SUNDRY WHEN DATA             |
| ROLLINS        | 10,783         | 10,925 | <input type="checkbox"/> | <input type="checkbox"/> | IS AVAILABLE.   |

Comment:

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

Signed: Y \_\_\_\_\_ Print Name: NICHOLAS.RONAN \_\_\_\_\_

Title: ENGINEERING TECH Date: 4/29/2008 Email: NICHOLAS.RONAN@ENCANA.COM

**Attachment Check List**

| Att Doc Num                 | Document Name         | attached ? |                                     |    |                                     |
|-----------------------------|-----------------------|------------|-------------------------------------|----|-------------------------------------|
| <u>Attachment Checklist</u> |                       |            |                                     |    |                                     |
|                             | CMT Summary *         | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
|                             | Core Analysis         | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
| 1825621                     | 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 type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
|                             | Other                 | Yes        | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |

**General Comments**

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

Total: 0 comment(s)