

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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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, reoperation 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 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 05-045-20405-00 6. County: GARFIELD 7. Well Name: HMU Fee 8. Location: QtrQtr: NWSE Section: 16 Township: 7S Range: 93W Meridian: 6 9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: COZZETTE Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/09/2012 End Date: 07/20/2012 Date of First Production this formation: 07/25/2012

Perforations Top: 10256 Bottom: 10415 No. Holes: 27 Hole size: 0.38

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

Stage 2 treated with a total of: 9524 bbls of Slickwater

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

Total fluid used in treatment (bbl): 9524 Max pressure during treatment (psi): 6558 Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.50 Type of gas used in treatment: Max frac gradient (psi/ft): 0.72 Total acid used in treatment (bbl): 0 Number of staged intervals: 9 Recycled water used in treatment (bbl): 9524 Flowback volume recovered (bbl): 28522 Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE Total proppant used (lbs): 0 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: 07/30/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569 GOR: 0 Test Method: Flowing Casing PSI: 875 Tubing PSI: Choke Size: 24/64 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: \*\* Wireline and Cement Job Summary must be attached.

FORMATION: CORCORAN Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/09/2012 End Date: 07/20/2012 Date of First Production this formation: 07/25/2012  
Perforations Top: 10462 Bottom: 10547 No. Holes: 27 Hole size: 0.38

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

Stage 1 treated with a total of: 9524 bbls of Slickwater.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 9524 Max pressure during treatment (psi): 6558

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.50

Type of gas used in treatment: \_\_\_\_\_ Max frac gradient (psi/ft): 0.72

Total acid used in treatment (bbl): 0 Number of staged intervals: 9

Recycled water used in treatment (bbl): 9524 Flowback volume recovered (bbl): 28522

Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 0 Rule 805 green completion techniques were utilized:

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

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

**Test Information:**

Date: 07/30/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569 GOR: 0

Test Method: Flowing Casing PSI: 875 Tubing PSI: \_\_\_\_\_ Choke Size: 24/64

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: \_\_\_\_\_ \*\* Wireline and Cement Job Summary must be attached.

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 07/09/2012 End Date: 07/20/2012 Date of First Production this formation: 07/25/2012  
Perforations Top: 7808 Bottom: 9719 No. Holes: 189 Hole size: 0.38

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

Stages 3-9 treated with a total of: 61,912 bbls of Slickwater.

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 61912 Max pressure during treatment (psi): 6558

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.50

Type of gas used in treatment: \_\_\_\_\_ Max frac gradient (psi/ft): 0.72

Total acid used in treatment (bbl): 0 Number of staged intervals: 9

Recycled water used in treatment (bbl): 61912 Flowback volume recovered (bbl): 28522

Fresh water used in treatment (bbl): 0 Disposition method for flowback: RECYCLE

Total proppant used (lbs): 0 Rule 805 green completion techniques were utilized:

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

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

**Test Information:**

Date: 07/30/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1054 Bbl H2O: 569 GOR: 0

Test Method: Flowing Casing PSI: 875 Tubing PSI: \_\_\_\_\_ Choke Size: 24/64

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: \_\_\_\_\_ \*\* Wireline and Cement Job Summary must be attached.

**Comment:**

Tubing has not been landed on this well. Encana will land tubing in 2-3 months. 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: 8/30/2012 Email: marina.ayala@encana.com

**Attachment Check List**

Att Doc Num	Name
400322534	FORM 5A SUBMITTED
400322546	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date
Permit	sundry sub. to add ILES as permitted fm.	9/14/2012 10:54:26 AM

Total: 1 comment(s)