

FORM
5
Rev
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



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Document Number:
2237771

Date Received:
10/24/2012

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 4. Contact Name: NICHOLAS RONAN
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3838
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6838
 City: DENVER State: CO Zip: 80202-

5. API Number 05-045-11858-01 6. County: GARFIELD
 7. Well Name: N.PARACHUTE Well Number: WF 16D-27 K25 5
 8. Location: QtrQtr: NESW Section: 26 Township: 5S Range: 96W Meridian: 6
 Footage at surface: Distance: 1596 feet Direction: FSL Distance: 2617 feet Direction: FWL
 As Drilled Latitude: 39.583269 As Drilled Longitude: -108.136754

GPS Data:

Date of Measurement: 10/31/2007 PDOP Reading: 2.6 GPS Instrument Operator's Name: GREG OLSEN

** If directional footage at Top of Prod. Zone Dist.: 247 feet. Direction: FSL Dist.: 491 feet. Direction: FEL

Sec: 27 Twp: 5S Rng: 96W

** If directional footage at Bottom Hole Dist.: 145 feet. Direction: FSL Dist.: 867 feet. Direction: FEL

Sec: 27 Twp: 5S 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) 11/28/2007 13. Date TD: 12/25/2007 14. Date Casing Set or D&A: 12/26/2007

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 9975 TVD** 8661 17 Plug Back Total Depth MD 9912 TVD** 8598

18. Elevations GR 6247 KB 6269

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	26	16		0	142	6	0	142	CALC
SURF	13+1/2	9+5/8		0	3,994	1,442	1,000	4,390	CALC
1ST	7+7/8	4+1/2		0	9,935	1,127	3,430	9,935	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
DV TOOL	SURF	1,000	372	0	1,000

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	6,239	9,814	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,814	9,975	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

GPS WAS SHOT ON CONDUCTOR STRING, SPUD DATE LISTED IN "SECTION 12" IS THE DATE OF SURFACE SECTION SPUD
****THIS WELL WAS SIDETRACKED****

FORM 5A DOC # 2237774

FORM 10 DOC #2172750 FORMS PROCESSOR

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

Signed: _____ Print Name: NICHOLAS RONAN

Title: ENGINEER TECH Date: 1/21/2010 Email: NICHOLAS.RONAN@ENCANA.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
2237773	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2237772	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"/>
Other Attachments			
2237771	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Well was sidetracked. CBL and Mud logs (only) run.	10/25/2012 1:25:43 PM

Total: 1 comment(s)