

FORM
5A

Rev
06/12

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:

400354636

Date Received:

12/06/2012

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
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: Jane Washburn
Phone: (720) 876-5431
Fax: (720) 876-6431

5. API Number 05-123-26212-00
6. County: WELD
7. Well Name: LIBSACK
Well Number: 4-8-27
8. Location: QtrQtr: SWSE Section: 27 Township: 4N Range: 65W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/12/2011 End Date: 08/12/2011 Date of First Production this formation: 03/23/2008

Perforations Top: 7218 Bottom: 7232 No. Holes: 50 Hole size:

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

Codell - Frac'd 7218-7232 w/114,458 gal frac fluid and 250,080 # sand.
CIBP set @ 7260 and CFP set @ 7070 on 8/12/11. Drilled out 10/21/11.

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

Total fluid used in treatment (bbl): 2725 Max pressure during treatment (psi): 4241

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

Type of gas used in treatment: Min frac gradient (psi/ft): 0.91

Total acid used in treatment (bbl): 0 Number of staged intervals: 1

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 266

Fresh water used in treatment (bbl): 2725 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 250080 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: ** Wireline and Cement Job Summary must be attached.

FORMATION: <u>J-NIOBRARA-CODELL</u>		Status: <u>PRODUCING</u>		Treatment Type: <u>FRACTURE STIMULATION</u>	
Treatment Date: <u>08/12/2011</u>		End Date: <u>08/12/2011</u>		Date of First Production this formation: <u>03/23/2008</u>	
Perforations	Top: <u>6941</u>	Bottom: <u>7740</u>	No. Holes: <u>158</u>	Hole size: _____	

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

Plugs were drilled out 10/21/2011 and zones commingled to produce.

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: _____	Min frac gradient (psi/ft): _____
Total acid used in treatment (bbl): _____	Number of staged intervals: _____
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: <input type="checkbox"/>

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: <u>10/27/2011</u>	Hours: <u>12</u>	Bbl oil: <u>10</u>	Mcf Gas: <u>289</u>	Bbl H2O: <u>7</u>
Calculated 24 hour rate:	Bbl oil: <u>20</u>	Mcf Gas: <u>578</u>	Bbl H2O: <u>14</u>	GOR: <u>28900</u>
Test Method: <u>Flowing</u>	Casing PSI: <u>510</u>	Tubing PSI: <u>338</u>	Choke Size: <u>20/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	Btu Gas: <u>1</u>	API Gravity Oil: <u>62</u>	
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>7664</u>	Tbg setting date: <u>10/21/2011</u>	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: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 08/12/2011 End Date: 08/12/2011 Date of First Production this formation: 03/23/2008

Perforations Top: 6941 Bottom: 7035 No. Holes: 68 Hole size:

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

Niobrara - Perfed 6941-6958, 4 spf, 68 holes. Frac'd 6941-7035 w/ 131,169 gal frac fluid and 250,120 # sand.

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

Total fluid used in treatment (bbl): 3123 Max pressure during treatment (psi): 5214

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

Type of gas used in treatment: Min frac gradient (psi/ft): 60.90

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

Recycled water used in treatment (bbl): 3123 Flowback volume recovered (bbl): 267

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

Total proppant used (lbs): 250120 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: ** Wireline and Cement Job Summary must be attached.

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: 12/6/2012 Email: jane.washburn@encana.com

Attachment Check List

Att Doc Num	Name
400354636	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date
Permit	Operator sent correct perforation intervals. Ready to pass.	2/6/2013 9:02:45 AM
Permit	On hold. Perforations do not match zones.	2/5/2013 1:15:21 PM

Total: 2 comment(s)