FORM 5	State of Colorado		DE	ET	OE	ES

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

DRILLING COMPLETION REPORT

DE	ET	OE	ES

Document Number:

400382764

Date Received:

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
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   05-045-21614-00
6. County: GARFIELD
7. Well Name: Shideler Fee   Well Number: 31-8C (K31E)
8. Location: QtrQtr: NESW   Section: 31   Township: 7S   Range: 92W   Meridian: 6
   Footage at surface: Distance: 2194   feet   Direction: FSL   Distance: 1432   feet   Direction: FWL
   As Drilled Latitude: 39.401798   As Drilled Longitude: -107.708320
GPS Data:
   Data of Measurement: 08/02/2012   PDOP Reading: 2.2   GPS Instrument Operator's Name: Brandon Birdsall

   ** If directional footage at Top of Prod. Zone   Dist.:   2137   feet. Direction: FNL   Dist.:   804   feet. Direction: FEL
      Sec: 31   Twp: 7S   Rng: 92W
   ** If directional footage at Bottom Hole   Dist.:   2113   feet. Direction: FNL   Dist.:   718   feet. Direction: FEL
      Sec: 31   Twp: 7S   Rng: 92W

9. Field Name: MAMM CREEK   10. Field Number: 52500
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt)   08/24/2012   13. Date TD: 09/16/2012   14. Date Casing Set or D&A: 09/17/2012

15. Well Classification:

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

16. Total Depth   MD   8565   TVD**   8079   17 Plug Back Total Depth   MD   8495   TVD**   8009

18. Elevations   GR   6899   KB   6921   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:

RST, CBL (included in Neutron Log) and 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	42	0	40	40	22	40	CALC
SURF	12+1/4	9+5/8	36	0	1,530	480	22	1,530	CALC
1ST	8+3/4	4+1/2	11.6	0	8,550	855	4,340	8,565	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	
MESAVERDE	4,874	5,626	☐	☐	
WILLIAMS FORK	5,627	8,414	☐	☐	
ROLLINS	8,415	8,565	☐	☐	

Comment:

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: _____   Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?

Attachment Checklist

Att Doc Num	Document Name	attached ?	
400382789	CMT Summary *	Yes ☒	No ☐
	Core Analysis	Yes ☐	No ☒
400382784	Directional Survey **	Yes ☒	No ☐
	DST Analysis	Yes ☐	No ☒
	Logs	Yes ☒	No ☐
	Other	Yes ☐	No ☒

Other Attachments

Att Doc Num	Document Name	attached ?	
400382773	PDF-MUD	Yes ☒	No ☐
400382774	LAS-NEUTRON	Yes ☒	No ☐
400382787	DIRECTIONAL DATA	Yes ☒	No ☐

General Comments

User Group	**Comment**	**Comment Date**

Total: 0 comment(s)