

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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Date Received:

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: Sheilla Reed-High
Phone: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-123-34751-00
6. County: WELD
7. Well Name: SHELEY
Well Number: 3B-4H
8. Location: QtrQtr: SWSW Section: 4 Township: 2N Range: 67W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/30/2013 End Date: 01/31/2013 Date of First Production this formation: 02/20/2013

Perforations Top: 7723 Bottom: 11643 No. Holes: 102 Hole size: 0.42

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

Stages 1-17 treated with a total of 3,196,833# 40/70 sand and 64,374 bbls fluid.

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

Total fluid used in treatment (bbl): 64374 Max pressure during treatment (psi): 7349
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.34
Type of gas used in treatment: Min frac gradient (psi/ft): 0.90
Total acid used in treatment (bbl): Number of staged intervals: 17
Recycled water used in treatment (bbl): 64374 Flowback volume recovered (bbl): 1977
Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 3196833 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: 02/21/2013 Hours: 24 Bbl oil: 373 Mcf Gas: 940 Bbl H2O: 177
Calculated 24 hour rate: Bbl oil: 373 Mcf Gas: 940 Bbl H2O: 177 GOR: 2520
Test Method: FLOWING Casing PSI: 2171 Tubing PSI: 1788 Choke Size: 16/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1271 API Gravity Oil: 49
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7539 Tbg setting date: 02/08/2013 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: Sheilla Reed-High

Title: Drilling and Compl. Tech. Date: _____ Email sheilla.reedhigh@Encana.com
:

Attachment Check List

Att Doc Num	Name
400427096	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)