

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:

400529789

Date Received:

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: Kelly Hamden
2. Name of Operator: ENCANA OIL & GAS (USA) INC	Phone: (720) 876-5185
3. Address: 370 17TH ST STE 1700	Fax: (720) 876-6185
City: DENVER State: CO Zip: 80202-	

5. API Number 05-123-37047-00	6. County: WELD
7. Well Name: Qualls	Well Number: 3C-28H
8. Location: QtrQtr: SWSW Section: 28 Township: 3N Range: 68W Meridian: 6	
Footage at surface: Distance: 802 feet Direction: FSL	Distance: 281 feet Direction: FWL
As Drilled Latitude: 40.191627	As Drilled Longitude: -105.016343

GPS Data:

Data of Measurement: 12/19/2013 PDOP Reading: 2.2 GPS Instrument Operator's Name: Scott Dawney

** If directional footage at Top of Prod. Zone Dist.: 1528 feet. Direction: FSL Dist.: 362 feet. Direction: FWL

Sec: 28 Twp: 3N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1491 feet. Direction: FSL Dist.: 486 feet. Direction: FEL

Sec: 28 Twp: 3N Rng: 68W

9. Field Name: WATTENBERG	10. Field Number: 90750
11. Federal, Indian or State Lease Number:	

12. Spud Date: (when the 1st bit hit the dirt) 07/06/2013	13. Date TD: 08/12/2013	14. Date Casing Set or D&A: 08/14/2013
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15. Well Classification:

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

16. Total Depth MD 11540 TVD** 7213	17 Plug Back Total Depth MD 11516 TVD** 7189
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18. Elevations GR 4957 KB 4981	One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.
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19. List Electric Logs Run:

CBL, MWD, Mud Logs

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	16	16	65.0	0	105	0	0	105	CALC
SURF	12+1/4	9+5/8	40.00	0	841	366	0	852	CALC
1ST	8+3/4	7	26.0	0	7,024	554	0	7,039	CALC
2ND	6+1/8	4+1/2	13.5	0	11,520	402	7,039	11,540	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	
NIOBRARA	6,790		<input type="checkbox"/>	<input type="checkbox"/>	
SHARON SPRINGS	6,800		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,338		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,430		<input type="checkbox"/>	<input type="checkbox"/>	

Comment: _____

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

Signed: _____

Print Name: Kelly Hamden

Title: Permitting Analyst

Date: _____

Email: Kelly.Hamden@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400529847	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400529844	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 checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400529820	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529821	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529822	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529823	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529828	PDF-CBL 1ST RUN	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400529845	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400530616	LAS-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400530621	PDF-Measurement/Logging While Drilling	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

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

Total: 0 comment(s)