

FORM
5Rev
09/14

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400717170

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

OGCC Operator Number: 100185

Contact Name: Bonnie Lamond

Name of Operator: ENCANA OIL & GAS (USA) INC

Phone: (720) 876-5156

Address: 370 17TH ST STE 1700

Fax:

City: DENVER

State: CO

Zip: 80202-

API Number 05-123-37793-00

County: WELD

Well Name: Boyd

Well Number: 3B-19H-M368

Location: QtrQtr: SWSW Section: 19 Township: 3N Range: 68W Meridian: 6

Footage at surface: Distance: 1059 feet Direction: FSL Distance: 612 feet Direction: FWL

As Drilled Latitude: 40.206588 As Drilled Longitude: -105.052987

GPS Data:

Date of Measurement: 10/24/2014 PDOP Reading: 5.7 GPS Instrument Operator's Name: Scott Downey

** If directional footage at Top of Prod. Zone Dist.: 1996 feet. Direction: FSL Dist.: 613 feet. Direction: FWL

Sec: 19 Twp: 3N Rng: 68W

** If directional footage at Bottom Hole Dist.: 1976 feet. Direction: FSL Dist.: 501 feet. Direction: FEL

Sec: 19 Twp: 3N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 06/14/2014 Date TD: 08/11/2014 Date Casing Set or D&A: 08/11/2014

Rig Release Date: 08/12/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 11588 TVD** 7065 Plug Back Total Depth MD 11536 TVD** 7065

Elevations GR 5005 KB 5018 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

Open-hole logs for this pad were run on the Boyd 3C-19H-M368 well.

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	16	42	0	93	114	0	93	CALC
SURF	12+1/4	9+5/8	40	0	860	305	0	860	CALC
1ST	8+3/4	7	26	0	7,461	615	0	7,443	CALC
2ND	6+1/8	4+1/2	13.5	0	11,588	345	7,443	11,577	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:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
FOX HILLS BASE	217				
SUSSEX	3,690				
SHANNON	4,180				
TEEPEE BUTTES	5,703				
SHARON SPRINGS	6,579				
NIOBRARA	6,667				
CODELL	6,965				

Comment:

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

Signed: _____

Print Name: Bonnie Lamond

Title: Regulatory Analyst Date: _____ Email: bonnie.lamond@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
400724697	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400724695	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>			
400724643	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400724644	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400724652	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400724667	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400724694	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400724703	WELL LOCATION PLAT	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)