

FORM
5
Rev
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



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Document Number:
400728305

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: Toby Sachen
Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5845
Address: 370 17TH ST STE 1700 Fax:
City: DENVER State: CO Zip: 80202-

API Number 05-123-39632-00 County: WELD
Well Name: Jillson-East Rinn Well Number: 3F-22H-M268
Location: QtrQtr: SWSW Section: 22 Township: 2n Range: 68w Meridian: 6
Footage at surface: Distance: 374 feet Direction: FSL Distance: 721 feet Direction: FWL
As Drilled Latitude: 40.117907 As Drilled Longitude: -104.996206

GPS Data:
Date of Measurement: 10/17/2014 PDOP Reading: 2.1 GPS Instrument Operator's Name: Chris Bettencourt

** If directional footage at Top of Prod. Zone Dist.: 820 feet. Direction: FSL Dist.: 1087 feet. Direction: FWL
Sec: 22 Twp: 2n Rng: 68w

** If directional footage at Bottom Hole Dist.: 2585 feet. Direction: FSL Dist.: 1153 feet. Direction: FWL
Sec: 15 Twp: 2n Rng: 68w

Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 07/17/2014 Date TD: 07/27/2014 Date Casing Set or D&A: 07/29/2014
Rig Release Date: 10/13/2014 Per Rule 308A.b.

Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 14922 TVD** 7320 Plug Back Total Depth MD 14910 TVD** 7320

Elevations GR 4953 KB 4966 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:
CBL, MWD No open hole logs on this pad. Induction log was run on Jillson 14-22, 123-23027, 260' away.

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	30	0	93	120	0	107	
SURF	12+1/4	9+5/8	40	0	855	342	0	855	
1ST	8+3/4	7	26	0	7,830	683	0	7,830	
2ND	6+1/8	4+1/2	13.5	0	14,910	665	5,820	14,910	

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	
SHARON SPRINGS	7,304				
NIOBRARA	7,474				

Comment:

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

Signed: _____

Print Name: Toby Sachen

Title: Regulatory Analyst

Date: _____

Email: toby.sachen@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400740153	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400740157	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"/>
Other Attachments			
400740132	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740145	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740148	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740150	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400740160	DIRECTIONAL DATA	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)