

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



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Document Number:

400739315

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: Erin Lind

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

Phone: (720) 876-5827

Address: 370 17TH ST STE 1700

Fax:

City: DENVER

State: CO

Zip: 80202-

API Number 05-123-38088-00

County: WELD

Well Name: Grant Hurt

Well Number: 1A-14H G268

Location: QtrQtr: SWNE Section: 14 Township: 2N Range: 68W Meridian: 6

Footage at surface: Distance: 2449 feet Direction: FNL Distance: 1599 feet Direction: FEL

As Drilled Latitude: 40.139285 As Drilled Longitude: -104.966732

GPS Data:

Date of Measurement: 12/04/2014

PDOP Reading: 2.0

GPS Instrument Operator's Name: CHRIS

** If directional footage at Top of Prod. Zone Dist.: 1434 feet. Direction: FNL Dist.: 2483 feet. Direction: FEL

Sec: 14 Twp: 2N Rng: 68W

** If directional footage at Bottom Hole Dist.: 506 feet. Direction: FNL Dist.: 2591 feet. Direction: FEL

Sec: 11 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) 07/21/2014 Date TD: 07/29/2014 Date Casing Set or D&A: 07/29/2014

Rig Release Date: 10/04/2014 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14193 TVD** 7443 Plug Back Total Depth MD 14128 TVD** 7443

Elevations GR 4888 KB 4918 Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, MWD. Open hole logs were run on the Grant Hurt 1G-14H.

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	65	0	117	180	0	117	CALC
SURF	12+1/4	9+5/8	40	0	865	354	0	885	CALC
1ST	8+3/4	7	26	0	7,949	698	0	7,967	CALC
2ND	6+1/8	4+1/2	13.5	0	14,178	601	5,951	14,193	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	
SUSSEX	4,226				
SHANNON	4,754				
TEEPEE BUTTES	6,000				
SHARON SPRINGS	7,103				
NIOBRARA	7,196				
CODELL	7,450				

Comment:

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

Signed: _____ Print Name: Erin Lind

Title: Regulatory Analyst Date: _____ Email: erin.lind@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400739365	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400739360	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>		
400739338	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400739350	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400739353	PDF-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400739357	LAS-MEASUREMENT/LOGGING WHILE DRILLING	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400739370	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)