

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: Bonnie Lamond Phone: (720) 876-5156 Fax: Email: bonnie.lamond@encana.com

5. API Number 05-123-37587-00 6. County: WELD 7. Well Name: Drieth Well Number: 1D-6H-A368 8. Location: QtrQtr: NENE Section: 6 Township: 3N Range: 68W Meridian: 6 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CARLILE Status: COMMINGLED Treatment Type: FRACTURE STIMULATION Treatment Date: 12/21/2014 End Date: 12/22/2014 Date of First Production this formation: 03/25/2015 Perforations Top: 9757 Bottom: 10612 No. Holes: 216 Hole size: 0.44 Provide a brief summary of the formation treatment: Open Hole: [X] This formation is commingled with another formation: [X] Yes [] No Total fluid used in treatment (bbl): 12913 Max pressure during treatment (psi): 7883 Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.30 Type of gas used in treatment: Min frac gradient (psi/ft): 0.87 Total acid used in treatment (bbl): Number of staged intervals: 9 Recycled water used in treatment (bbl): Flowback volume recovered (bbl): Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL Total proppant used (lbs): 593019 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: Hours: Bbl oil: Mcf Gas: Bbl H2O: Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR: Test Method: Casing PSI: Tubing PSI: Choke Size: Gas Disposition: Gas Type: Btu Gas: API Gravity Oil: Tubing Size: Tubing Setting Depth: Tbg setting date: 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.

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/19/2014 End Date: 12/24/2014 Date of First Production this formation: 03/25/2015

Perforations Top: 7649 Bottom: 11516 No. Holes: 792 Hole size: 0.44

Provide a brief summary of the formation treatment: _____ Open Hole:

Stages 1-10 stimulated the Codell: Top = 10,667' Bottom = 11,516'
Stages 26-40 stimulated the Codell: Top = 7,649' Bottom = 9,105'

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 37850

Max pressure during treatment (psi): 8054

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.83

Total acid used in treatment (bbl): _____

Number of staged intervals: 26

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 1699142

Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7348 Tbg setting date: 01/18/2015 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.

FORMATION: FORT HAYS Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/22/2014 End Date: 12/23/2014 Date of First Production this formation: 03/25/2015

Perforations Top: 9159 Bottom: 9709 No. Holes: 144 Hole size: 0.44

Provide a brief summary of the formation treatment: _____ Open Hole:

Stages 20-21 stimulated the Fort Hays: Top = 9,558' Bottom = 9,709'
Stages 24-25 stimulated the Fort Hays: Top = 9,159' Bottom = 9,307'

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 8081

Max pressure during treatment (psi): 8228

Total gas used in treatment (mcf): _____

Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: _____

Min frac gradient (psi/ft): 0.91

Total acid used in treatment (bbl): _____

Number of staged intervals: 4

Recycled water used in treatment (bbl): _____

Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____

Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 273473

Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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.

FORMATION: NIOBRARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/23/2014 End Date: 12/23/2014 Date of First Production this formation: 03/25/2015

Perforations Top: 9355 Bottom: 9505 No. Holes: 48 Hole size: 0.44

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

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 2761 Max pressure during treatment (psi): 7889

Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal): 8.30

Type of gas used in treatment: Min frac gradient (psi/ft): 0.80

Total acid used in treatment (bbl): Number of staged intervals: 2

Recycled water used in treatment (bbl): Flowback volume recovered (bbl):

Fresh water used in treatment (bbl): Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 124446 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: Hours: Bbl oil: Mcf Gas: Bbl H2O:

Calculated 24 hour rate: Bbl oil: Mcf Gas: Bbl H2O: GOR:

Test Method: Casing PSI: Tubing PSI: Choke Size:

Gas Disposition: Gas Type: Btu Gas: API Gravity Oil:

Tubing Size: Tubing Setting Depth: Tbg setting date: 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.

FORMATION: NIOBRARA-FORT HAYS-CODELL-CARLILE Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 03/25/2015
Perforations Top: 7649 Bottom: 11516 No. Holes: 1200 Hole size: 0.44

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

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 71778 Max pressure during treatment (psi): 8228
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 8.30
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.83
Total acid used in treatment (bbl): 24 Number of staged intervals: 40
Recycled water used in treatment (bbl): 5192 Flowback volume recovered (bbl): 5192
Fresh water used in treatment (bbl): 66561 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 2690080 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 04/01/2015 Hours: 24 Bbl oil: 119 Mcf Gas: 108 Bbl H2O: 150
Calculated 24 hour rate: Bbl oil: 119 Mcf Gas: 108 Bbl H2O: 150 GOR: 907
Test Method: FLOW Casing PSI: 1923 Tubing PSI: 663 Choke Size: _____
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1298 API Gravity Oil: 50
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7349 Tbg setting date: 01/18/2015 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: Bonnie Lamond
Title: Regulatory Analyst Date: _____ Email: bonnie.lamond@encana.com

Attachment Check List

Att Doc Num	Name
400800788	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)