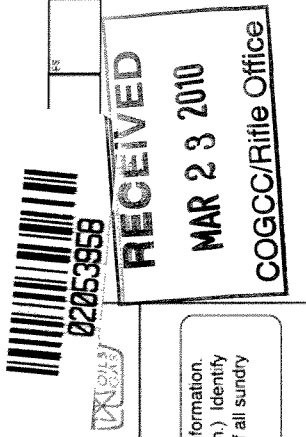


State of Colorado
Oil and Gas Conservation Commission
SUNDRY NOTICE

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



Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 100185	4. Contact Name
2. Name of Operator: ENCANA OIL & GAS (USA) INC	MIRACLE PFISTER
3. Address: 370 17TH ST, STE 1700	Phone: 720-876-3761
City: DENVER State: CO Zip: 80202	Fax: 720-876-6060
5. API Number 05-045-18729-00	OGCC Facility ID Number
6. Well/Facility Name: GMU	7. Well/Facility Number 27-8C1 (H27NW)
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SENE SEC 27 T6S-R93W 6TH PM	Surface Eqpmt Diagram
9. County: GARFIELD	10. Field Name: MAMM CREEK
11. Federal, Indian or State Lease Number: COC56608A	Technical Info Page
	Other

Complete the Attachment Checklist

OP OGCC

General Notice

☐ **CHANGE OF LOCATION: Attach New Survey Plat** (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines	FNL/FSL	FEL/FWL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer		attach directional survey
Latitude		Distance to nearest property line
Longitude		Distance to nearest lease line
Ground Elevation		Distance to nearest well same formation
		Surface owner consultation date:

GPS DATA:

Date of Measurement PDOP Reading Instrument Operator's Name

☐ **CHANGE SPACING UNIT**

Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration
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☐ **Remove from surface bond**
Signed surface use agreement attached

☐ **CHANGE OF OPERATOR (prior to drilling):**

Effective Date: From: To: Effective Date:

Plugging Bond: ☐ Blanket ☐ Individual

☐ **ABANDONED LOCATION:**

Was location ever built? ☐ Yes ☐ No

Is site ready for inspection? ☐ Yes ☐ No

Date Ready for Inspection: MIT required if shut in longer than two years. Date of last MIT

☐ **SPUD DATE:**

☐ **REQUEST FOR CONFIDENTIAL STATUS** (6 mos from date casing set)

☐ **SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK** *submit cbl and cement job summaries

Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date
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☐ **RECLAMATION:** Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately ☐ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

☒ Notice of Intent

Approximate Start Date: UPON APPROVAL

Report of Work Done

Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: REQUEST TO COMPLETE	for Spills and Releases

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

Signed: *Miracle Pfister* Date: 3/22/2010 Email: miracle.pfister@encana.com

Print Name: Miracle Pfister Title: Regulatory Analyst

COGCC Approved: *[Signature]* Title: ETL Date: 3/24/2010

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

Doc # 02053958
RECEIVED
MAR 23 2010
COGCC/Rifle Office

1. Operator Number: 100185 API Number: 05-045-18729
2. Name of Operator: ENCANA OIL & GAS (USA) INC.
3. Well Name: GMU Well Number: 27-8C1 (H27NW)
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENE SEC 27 T6S-R93W 6TH PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

THE REFERENCED WELL HAS BEEN SUCCESSFULLY CEMENTED ACCORDING TO THE APPROVED PLAN AND SUMMARY OF THE BRADENHEAD MONITORING COMPLETED.

ENCANA OIL & GAS (USA) INC. REQUESTS APPROVAL TO COMMENCE COMPLETIONS OPERATIONS.

ATTACHMENTS:

CBL
AS-BUILT WELLBORE SCHEMATIC
TEMPERATURE SURVEY
BRADENHEAD PRESSURE SUMMARY → 911 0"

Toc 3920±
(or 3800')

Surf ≈ 1280'

Toc = 6722'