

State of Colorado

Oil and Gas Conservation Commission

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



RECEIVED

MAR 25 2010

COGCC/Rifle Office

Complete the Attachment
Checklist

OP OGCC

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	DeAnne Spector
3. Address: 370 17TH ST, STE 1700	Phone: 720-876-5826
City: DENVER State: CO Zip: 80202	Fax: 720-876-6060
5. API Number 05-077-08855	OGCC Facility ID Number
6. Well/Facility Name Keinath Federal	7. Well/Facility Number 8-6 (F8OU)
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SENW Sec. 8 T8S-R86W 6th PM	
9. County MESA	10. Field Name: Orchard
11. Federal, Indian or State Lease Number: COC59629	

Survey Plat	
Directional Survey	
Surface Eqpm't Diagram	
Technical Info Page	X
Other	

General Notice

<input type="checkbox"/> 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	Distance to nearest bldg, public rd, utility or RR
Longitude	Distance to nearest lease line	Is location in a High Density Area (rule 603b)? Yes/No
Ground Elevation	Distance to nearest well same formation	Surface owner consultation date:

GPS DATA:

Date of Measurement	PDOP Reading	Instrument Operator's Name
<input type="checkbox"/> CHANGE SPACING UNIT		<input type="checkbox"/> Remove from surface bond
Formation	Formation Code	Spacing order number
	Unit Acreage	Unit configuration
		Signed surface use agreement attached

☐ CHANGE OF OPERATOR (prior to drilling):

Effective Date:	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	From:	To:
	Effective Date:	

☐ ABANDONED LOCATION:

Was location ever built?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is site ready for inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Ready for Inspection:	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No
	MIT required if shut in longer than two years. Date of last MIT

☐ SPUD DATE:

<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

☐ SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

☐ RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.
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Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	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 checked="" 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 type="checkbox"/> Other:	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: DeAnne Spector Date: 3/23/09 Email: deanne.spector@encana.com

Print Name: DeAnne Spector Title: Regulatory Analyst

COGCC Approved: Keinath Federal Title: EIT III Date: MAR 31 2010

CONDITIONS OF APPROVAL IF ANY:

TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY



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1. Operator Number: 100185 API Number: 05-077-08855
2. Name of Operator: ENCANA OIL & GAS (USA) INC.
3. Well Name: Keinath Federal Well Number: 8-6 (F8OU)
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENW Sec. 8 T8S-R96W 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.

EnCana Oil & Gas (USA) Inc. requests approval to trip tubing and fix hole in tubing.

Tubing was tested and confirmed to have a hole.

Procedure:

1. MIRU pulling unit.
2. Top kill well if necessary, ND WH, NU BOPs.
3. RIH w/ tbq, confirm PBTD at 5266'; if fill is encountered, check w/ Denver for c/o procedure.
4. POOH w/ 130 jts 2-3/8" 4.7# J55 tbq.

5. Visually check tbq for damage/scale, replace where necessary.

***Please make note of the depth of the hole(s) and send in for analysis.**

6. If scale is found, RIH w/ full gauge mill to PBTD.

Call Denver for acid procedure (if scale found).

7. RIH w/ 2-3/8" J55 tbq, land EOT @ ~4225'- (Confirm prior to setting).

8. Place well back on production.

10. RDMO

Call Craig Miley @ (303) 495-8665 if there are any questions.