

FORM  
5  
Rev  
02/08

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:  
1637938

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

1. OGCC Operator Number: 100185 4. Contact Name: HEATHER MITCHELL  
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (303) 623-2300  
3. Address: 370 17TH ST STE 1700 Fax: (303) 623-2400  
City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-17644-00 6. County: GARFIELD  
7. Well Name: N. Parachute Well Number: EF11C-22 D27A 5  
8. Location: QtrQtr: NWNW Section: 27 Township: 5S Range: 95W Meridian: 6  
Footage at surface: Direction: FNL Distance: 590 Direction: FWL Distance: 238  
As Drilled Latitude: 39.590402 As Drilled Longitude: -108.049107

GPS Data:

Data of Measurement: 09/22/2009 PDOP Reading: 3.9 GPS Instrument Operator's Name: MARIO PALLONE

\*\* If directional footage

at Top of Prod. Zone Distance: 1885 Direction: FSL Distance: 1971 Direction: FWL  
at Bottom Hole Distance: 1894 Direction: FSL Distance: 1948 Direction: FWL

9. Field Name: GRAND VALLEY 10. Field Number: 31290

11. Federal, Indian or State Lease Number: \_\_\_\_\_

12. Spud Date: (when the 1st bit hit the dirt) 10/16/2009 13. Date TD: 11/30/2009 14. Date Casing Set or D&A: 12/01/2009

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 10735 TVD 9947 17 Plug Back Total Depth MD 10698 TVD 9905

18. Elevations GR 6303 KB 6325

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

RST, CBL, MUD

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	26	16		120	235	120	0
SURF	12+1/4	9+5/8		1,840	403	1,840	0
1ST	7+7/8	4+1/2		10,723	1,416	10,723	1,508

REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Details of work: \_\_\_\_\_

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WILLIAMS FORK	7,084	10,648	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	10,648	10,735	<input type="checkbox"/>	<input type="checkbox"/>	

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

Signed: \_\_\_\_\_ Print Name: HEATHER MITCHELL

Title: REG ANALYST Date: 4/19/2010 Email: HEATHER.MITCHELL@ENCANA.COM

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: *David S. Neslin* Director of COGCC Date: 6/21/2010

**Attachment Check List**

Att Doc Num	Name	Doc Description
1544025	MUD	LF@2480898 1544025
1544026	CEMENT BOND	LF@2480877 1544026
1544027	GAMMA RAY	LF@2480878 1544027
1637938	FORM 5 SUBMITTED	LF@2480812 1637938
1637939	DIRECTIONAL SURVEY	LF@2480813 1637939

Total Attach: 5 Files