

SUNDRY NOTICE

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.)

- OGCC Operator Number: 100185
- Name Of Operator: EnCana Oil & Gas (USA) Inc.
- Address: 370 17th Street, Suite 1700
City: Denver State: CO Zip: 80202
- API Number: 05045114380000
- Well/Facility Name: N Parachute EF IID C28 595
- Location (Qtr/Qtr, Sec. Twp, Rng, Meridian): NENW Sec 28 T5S - R95W 6th PM
- County: GARFIELD
- Federal, Indian or State Lease Number:

- Contact Name: HEATHER MITCHELL
- Phone: 720-876-3070
- Fax: 720-876-4070

- OGCC Facility ID Number: IID C28 595
- Well/Facility Number: IID C28 595
- Field Name: Wildcat

Complete the Attachment Checklist

| | | | |
|-----------------------|-------------------------------------|----|------|
| Survey Plat | <input type="checkbox"/> | OP | OGCC |
| Directional Survey | <input type="checkbox"/> | | |
| Surface Eqpmt Diagram | <input type="checkbox"/> | | |
| Technical Info Page | <input checked="" type="checkbox"/> | | |
| Other | <input type="checkbox"/> | | |

General Notice

(a change of surface qtr/qtr is substantive and requires a new permit)
FNL/FSL

CHANGE OF LOCATION: Attach New Survey Plat

- Change of **Surface Footage from** Exterior Section Lines:
- Change of **Surface Footage to** Exterior Section Lines:
- Change of **Bottomhole Footage from** Exterior Section Lines:
- Change of **Bottomhole Footage to** Exterior Section Lines:
- Bottom hole location Qtr/Qtr, Sec. Twp. Rng, Mer
- Latitude Distance to nearest property line
- Longitude Distance to nearest lease line
- Ground Elevation Distance to nearest well same formation

attach directional survey

Distance to nearest bldg, public rd, utility or RR
Is location in a High Density Area (Rule 603b)? Yes/No
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

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

CHANGE WELL NAME

NUMBER

ABANDONED LOCATION:

Is 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

NOTICE OF CONTINUED SHUT IN STATUS

Date well shut in or temporarily abandoned:
Has Production Equipment been removed from site? Yes No
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

Method used Cementing tool setting/perf depth Cement top Cement bottom Date
*submit cbl and cement job summaries

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 Report of Work Done
Approximate Start Date: Date Work Completed: 10/13/2010

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

- Intent To Recomplete (submit form 2)
- Change Drilling Plans
- Gross Interval Changed?
- Casing/Cementing Program Change
- Request to Vent or Flare
- Repair Well
- Rule 502 variance requested
- Other:
- E&P Waste Disposal
- Beneficial Reuse of E&P Waste
- Status Update/Change of Remediation Plans 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: *Heather Mitchell* Date: 10/18/2010 Email: Heather.Mitchell@encana.com

Print Name: HEATHER MITCHELL Title: REGULATORY ANALYST

COGCC Approved: *Heather Mitchell* Title: *ETS* Date: *12/6/2010*
CONDITIONS OF APPROVAL, IF ANY:



TECHNICAL INFORMATION PAGE

- 1. OGCC Operator Number: 100195 API Number: 0504511438000
- 2. Name of Operator: EnCana Oil & Gas (USA) Inc OGCC Facility ID #: 11D C28 595
- 3. Well/Facility Name: A Parachute EF11D C28 595 Well/Facility Number: 11D C28 595
- 4. Location (City, State, Township, Range, Meridian): NENW Sec. 28 T5S - R65W 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

A gas lift was installed on the above referenced well on 10/13/2010.

