

State of Color
Oil and Gas Conservatio.



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

DE ET QE YES

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.)

RECEIVED
OCT 18 2010
COGCC/Rifle Office

1. OGCC Operator Number :	100185	4. Contact Name :	HEATHER MITCHELL
2. Name Of Operator :	EnCana Oil & Gas (USA) Inc.	Phone :	720-876-3070
3. Address :	370 17th Street, Suite 1700	Fax :	720-876-4070
City :	Denver	State :	CO
5. API Number :	05045118720000	OGCC Facility ID Number :	14B C28 595
6. Well/Facility Name :	N Parachute EF14B C28 595	7. Well/Facility Number :	14B C28 595
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian) :	NENW Sec 28 T5S - R95W 6th PM		
9. County :	GARFIELD	10. Field Name :	Wildcat
11. Federal, Indian or State Lease Number :			

Complete the Attachment Checklist

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

General Notice

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

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	<input type="checkbox"/> Remove from surface bond Signed surface use agreement attached
---------------------	-----------	----------------	----------------------	--------------	--------------------	--

CHANGE OF OPERATOR (prior to drilling):

Effective Date :	From :	CHANGE WELL NAME	NUMBER
Plugging Bond :	Blanket Individual	To : Effective Date :	

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
-------------	-----------------------------------	---------------	------------	---------------	------

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 : 10/01/2010

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

☐ 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: EITC Title: Date: 12/6/2010

CONDITIONS OF APPROVAL IF ANY



FOR OGCC USE ONLY

TECHNICAL INFORMATION PAGE

1. OGCC Operator Number: 100195

2. Name of Operator: EnCana Oil & Gas (USA) Inc.

3. Well/Facility Name: N Parachute EF145 C28 595

4. Location (CtrQtr Sec, Twp, Rng, Meridian): NENW Sec 28 T5S - R95W 6th PM
- API Number (5046)1872000

OGCC Facility ID #: 145 C28 595

Well/Facility Number: 145 C28 595

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 10/01/2010.

