

FORM  
5A  
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



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COMPLETED INTERVAL REPORT

Document Number:  
2565647

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100185  
2. Name of Operator: ENCANA OIL & GAS (USA) INC  
3. Address: 370 17TH ST STE 1700  
City: DENVER State: CO Zip: 80202-56  
4. Contact Name: SHEILLA REED-HIGH  
Phone: (720) 876-3678  
Fax: (720) 876-4678

5. API Number 05-123-31575-00  
6. County: WELD  
7. Well Name: DAVIS Well Number: 2-4-9  
8. Location: QtrQtr: SWNW Section: 9 Township: 2N Range: 66W Meridian: 6  
9. Field Name: WATTENBERG Field Code:

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 08/04/2010 Date of First Production this formation:

Perforations Top: 7264 Bottom: 7984 No. Holes: 156 Hole size:

Provide a brief summary of the formation treatment: Open Hole:

JSND-NBRR-COMMINGLE: SET CBP @ 7160'. 08-16/10. DRILLED OUT CBP @ 7160', CFP @ 7380' AND CFP @ 7620' TO COMMINGLE THE JSND-CDL-NBRR. 08-17-10

This formation is commingled with another formation:  Yes  No

Test Information:

Date: 08/28/2010 Hours: 23 Bbls oil: 167 Mcf Gas: 408 Bbls H2O: 59

Calculated 24 hour rate: Bbls oil: 174 Mcf Gas: 424 Bbls H2O: 61 GOR: 2437

Test Method: FLOWING Casing PSI: 2035 Tubing PSI: 1282 Choke Size:

Gas Disposition: SOLD Gas Type: DRY BTU Gas: API Gravity Oil:

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7943 Tbg setting date: 08/17/2010 Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze:  Yes  No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

FORMATION: J SAND Status: PRODUCING

Treatment Date: 08/04/2010 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 7966 Bottom: 7984 No. Holes: 40 Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

J SAND COMPLETION: FRAC'D TEH J-SAND WITH 153,678 GAL 18# VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,480# 20/40 SAND. 08-04-10

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_ GOR: \_\_\_\_\_

Test Method: \_\_\_\_\_ Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_

Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_

Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ Packer Depth: \_\_\_\_\_

Reason for Non-Production: \_\_\_\_\_

Date formation Abandoned: \_\_\_\_\_ Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: \_\_\_\_\_ Sacks cement on top: \_\_\_\_\_

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 08/04/2010 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 7264 Bottom: 7516 No. Holes: 116 Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

CDL-NBRR COMPLETION: SET CFP @ 7620'. 08-04-10. FRAC'D THE CODELL WITH 109,914 GAL 22# VISTAR HYBRID CROSS LINKED GEL CONTAINING 252,980# 20/40 SAND. SET CFP @ 7380'. 08-04-10. FRAC'D THE NIOBRARA WITH 139,944 GALS 18# VISTAR HYBRID CROSS LINKED GEL CONTAINING 250,380# 20/40 SAND. 08-04-10.

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbls H2O: \_\_\_\_\_ GOR: \_\_\_\_\_

Test Method: \_\_\_\_\_ Casing PSI: \_\_\_\_\_ Tubing PSI: \_\_\_\_\_ Choke Size: \_\_\_\_\_

Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: \_\_\_\_\_ API Gravity Oil: \_\_\_\_\_

Tubing Size: \_\_\_\_\_ Tubing Setting Depth: \_\_\_\_\_ Tbg setting date: \_\_\_\_\_ Packer Depth: \_\_\_\_\_

Reason for Non-Production: \_\_\_\_\_

Date formation Abandoned: \_\_\_\_\_ Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: \_\_\_\_\_ Sacks cement on top: \_\_\_\_\_

Comment: \_\_\_\_\_

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

Signed: \_\_\_\_\_

Print Name: SHEILLA REED-HIGH

Title: OPERATIONS TECH

Date: \_\_\_\_\_

Email SHEILLA.REEDHIGH@ENCANA.COM

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Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Neslin

Director of COGCC

Date: 12/22/2010

### Attachment Check List

Att Doc Num	Name
2565647	FORM 5A SUBMITTED
2565648	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)