

FORM
5Rev
02/08State 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:

400128356

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: Judith Walter
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3702
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4702
City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-19001-00 6. County: GARFIELD
7. Well Name: Story Gulch Unit Well Number: 8508B-36 B36496
8. Location: QtrQtr: Lot 2 Section: 36 Township: 4S Range: 96W Meridian: 6
Footage at surface: Distance: 685 feet Direction: FNL Distance: 1599 feet Direction: FEL
As Drilled Latitude: 39.664177 As Drilled Longitude: -108.113354

GPS Data:

Data of Measurement: 03/03/2010 PDOP Reading: 1.4 GPS Instrument Operator's Name: Brian Baker

** If directional footage

at Top of Prod. Zone Distance: 1774 feet Direction: FNL Distance: 662 feet Direction: FEL
Sec: 36 Twp: 4S Rng: 96W
at Bottom Hole Distance: 1772 feet Direction: FNL Distance: 700 feet Direction: FEL
Sec: 36 Twp: 4S Rng: 96W

9. Field Name: WILDCAT 10. Field Number: 9999911. Federal, Indian or State Lease Number: COC6555712. Spud Date: (when the 1st bit hit the dirt) 05/26/2010 13. Date TD: 07/20/2010 14. Date Casing Set or D&A: 07/21/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 12395 TVD 12261 17 Plug Back Total Depth MD 12340 TVD 1220618. Elevations GR 8351 KB 8373

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 and Isolation Scanner (Cement Bond Log), all in one .las file uploaded.

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	30	20	53	0	120	213	0	120	CALC
SURF	14+3/4	9+5/8	36	0	3,032	1,108	0	3,032	CALC
1ST	8+3/4	4+1/2	11.6	0	12,363	1,836	900	12,363	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

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	8,293	12,117	<input type="checkbox"/>	<input type="checkbox"/>	Top of Gas 8639'
ROLLINS	12,118	12,395	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____ Print Name: Judith Walter

Title: Regulatory Analyst Date: _____ Email: judith.walter@encana.com

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

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400128387	LAS-NEUTRON
400128391	DIRECTIONAL SURVEY
400128428	CEMENT JOB SUMMARY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)