

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

DRILLING COMPLETION REPORT

Document Number:

2511668

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
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: MARINA AYALYA
Phone: (720) 876-3663
Fax: (720) 876-4663

5. API Number 05-045-15267-00
6. County: GARFIELD
7. Well Name: N. PARACHUTE
Well Number: EF01C-28 A28B 5
8. Location: QtrQtr: NENE Section: 28 Township: 5S Range: 95W Meridian: 6
Footage at surface: Distance: 506 feet Direction: FNL Distance: 466 feet Direction: FEL
As Drilled Latitude: 39.590638 As Drilled Longitude: -108.051620

GPS Data:

Data of Measurement: 06/01/2010 PDOP Reading: 2.7 GPS Instrument Operator's Name: BRANDON BIRDSALL

** If directional footage

at Top of Prod. Zone Distance: 688 feet Direction: FNL Distance: 777 feet Direction: FEL
Sec: 28 Twp: 5S Rng: 95W
at Bottom Hole Distance: 708 feet Direction: FNL Distance: 793 feet Direction: FEL
Sec: 28 Twp: 5S Rng: 95W

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) 09/25/2008 13. Date TD: 02/05/2010 14. Date Casing Set or D&A: 02/06/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 9960 TVD 9934 17 Plug Back Total Depth MD 9887 TVD 9861

18. Elevations GR 6318 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:

CBL, MUD AND RST

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	24	16		0	140	1,275	0	0	CALC
SURF	12+1/4	9+5/8		0	2,034	439	0	0	CALC
1ST	8+3/4	4+1/2		0	9,939	1,294	1,990	9,960	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	6,198	9,784	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,784	9,960	<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: MARINA AYALA

Title: ENGINEERING TECHNICIAN Date: 8/9/2010 Email: MARINA.AYALA@ENCANA.COM

Attachment Check List

Att Doc Num	Name
2511668	FORM 5 SUBMITTED
2511669	DIRECTIONAL SURVEY
2511670	CEMENT JOB SUMMARY

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)