

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:

2511882

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: MARINA AYALA
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3663
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4663
City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-18728-00 6. County: GARFIELD
7. Well Name: GMU Well Number: 27-1C2 (H27NW)
8. Location: QtrQtr: SENE Section: 27 Township: 6S Range: 93W Meridian: 6
Footage at surface: Distance: 1697 feet Direction: FNL Distance: 953 feet Direction: FEL
As Drilled Latitude: 39.499991 As Drilled Longitude: -107.755737

GPS Data:

Data of Measurement: 03/19/2010 PDOP Reading: 1.9 GPS Instrument Operator's Name: B. BIRDSALL

** If directional footage

at Top of Prod. Zone Distance: 1197 feet Direction: FNL Distance: 971 feet Direction: FEL
Sec: 27 Twp: 6S Rng: 93W
at Bottom Hole Distance: 1210 feet Direction: FNL Distance: 965 feet Direction: FEL
Sec: 27 Twp: 6S Rng: 93W

9. Field Name: MAMM CREEK 10. Field Number: 52500
11. Federal, Indian or State Lease Number: COC54737

12. Spud Date: (when the 1st bit hit the dirt) 11/25/2009 13. Date TD: 01/17/2010 14. Date Casing Set or D&A: 01/18/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 8836 TVD 8810 17 Plug Back Total Depth MD 8776 TVD 8750

18. Elevations GR 6321 KB 6343

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 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	26	16		0	62	4	0	40	CALC
SURF	12+1/4	9+5/8		0	1,275	413	0	1,275	CALC
1ST	8+3/4	4+1/2		0	8,820	987	3,580	8,836	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	5,695	8,736	<input type="checkbox"/>	<input type="checkbox"/>	TOG @ 6756'
ROLLINS	8,737	8,836	<input type="checkbox"/>	<input type="checkbox"/>	TD @ 8836'

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: 8/13/2010 Email: MARINA.AYALA@ENCANA.COM

Attachment Check List

Att Doc Num	Name
2511882	FORM 5 SUBMITTED
2511883	CEMENT JOB SUMMARY
2511884	DIRECTIONAL SURVEY

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)