

**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

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.

Document Number:

2512084

Completion Type ☒ Final completion ☐ Preliminary completion

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 ST STE 1700 Fax: (720) 876-4070
City: DENVER State: CO Zip: 80202-56

5. API Number 05-045-18076-00 6. County: GARFIELD
7. Well Name: N. PARACHUTE Well Number: EF03A-33 C28A 5
8. Location: QtrQtr: NENW Section: 28 Township: 5S Range: 95W Meridian: 6
Footage at surface: Distance: 1290 feet Direction: FNL Distance: 1575 feet Direction: FWL
As Drilled Latitude: 39.588522 As Drilled Longitude: -108.063077

GPS Data:

Data of Measurement: 04/20/2010 PDOP Reading: 2.6 GPS Instrument Operator's Name: BRANDON BIRDSALL

** If directional footage

at Top of Prod. Zone Distance: 49 feet Direction: FNL Distance: 2177 feet Direction: FWL
Sec: 33 Twp: 5S Rng: 95W
at Bottom Hole Distance: 121 feet Direction: FNL Distance: 2157 feet Direction: FWL
Sec: 33 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) 12/18/2009 13. Date TD: 02/08/2010 14. Date Casing Set or D&A: 02/11/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 11080 TVD 9660 17 Plug Back Total Depth MD 11038 TVD 961018. Elevations GR 6169 KB 6191

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, CBL AND MUD

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	120	232	0	120	CALC
SURF	12+1/4	9+5/8		0	1,722	383	0	1,722	CALC
1ST	8+3/4	4+1/2		0	11,064	1,500	2,035	11,064	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	7,337	10,827	<input type="checkbox"/>	<input type="checkbox"/>	TOG: 7352
ROLLINS	10,828	11,080	<input type="checkbox"/>	<input type="checkbox"/>	TOC: 2035

Comment:

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

Signed: _____ Print Name: HEATHER MITCHELL

Title: REGULATORY ANALYST Date: 8/19/2010 Email: HEATHER.MITCHELL@ENCANA.COM

Attachment Check List

Att Doc Num	Name
2512084	FORM 5 SUBMITTED
2512085	DIRECTIONAL SURVEY
2512086	CEMENT JOB SUMMARY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)