

**FORM
5**Rev
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:

2512501

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: SHEILLA REED-HIGH
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 8763678
3. Address: 370 17TH ST STE 1700 Fax: (720) 8764678
City: DENVER State: CO Zip: 80202-56

5. API Number 05-123-30786-00 6. County: WELD
7. Well Name: DAVIS Well Number: 6-4-9
8. Location: QtrQtr: SENE Section: 9 Township: 2N Range: 66W Meridian: 6
Footage at surface: Distance: 2119 feet Direction: FNL Distance: 547 feet Direction: FEL
As Drilled Latitude: _____ As Drilled Longitude: _____

GPS Data:

Data of Measurement: _____ PDOP Reading: _____ GPS Instrument Operator's Name: _____

** If directional footage at Top of Prod. Zone Dist.: 2537 feet. Direction: FNL Dist.: 1317 feet. Direction: FEL
Sec: 9 Twp: 2N Rng: 66W

** If directional footage at Bottom Hole Dist.: 2524 feet. Direction: FNL Dist.: 1354 feet. Direction: FEL
Sec: 9 Twp: 2N Rng: 66W

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 06/27/2010 13. Date TD: 07/02/2010 14. Date Casing Set or D&A: 07/03/2010

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation16. Total Depth MD 8105 TVD** 7999 17 Plug Back Total Depth MD 8040 TVD** 793418. Elevations GR 4933 KB 4945

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

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
SURF	12+1/4	8+5/8		0	911	340	0	911	CALC
1ST	7+7/8	4+1/2		0	8,100	867	6,700	8,100	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	5,534	170	4,080	5,534

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	
SUSSEX	4,518		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,272		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,516		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	7,944		<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: SHEILLA REED-HIGH

Title: OPERATIONS TECHNOLOGIST Date: 8/30/2010 Email: SHEILLA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
2072123	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
2072116	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
2072116	DIRECTIONAL SURVEY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
2072123	CEMENT JOB SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
2072124	CEMENT JOB SUMMARY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
2512501	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	rec D/S, waiting on cmt tkts	1/24/2011 2:09:31 PM
Permit	REQ CEMENT TKT & D/S	1/24/2011 9:19:13 AM

Total: 2 comment(s)