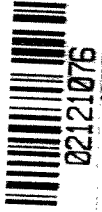


State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 100185
 2. Name of Operator: EnCana Oil & Gas (USA) Inc.
 3. Address: 370 17th Street Suite 1700 Denver CO Zip 80202 State: CO City: Denver
 4. Contact Name: Heather Mitchell
 Phone: 720.876.3070 Fax: 720.876.4070
 5. API Number 05-045-18698-00 OGCC Facility ID Number
 6. Well/Facility Name: N. Parachute Well/Facility Number MF05A-16 H17 696
 7. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SENE Sec 17 T6S-R96W, 6th PM
 8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):
 9. County: Garfield 10. Field Name: Grand Valley
 11. Federal, Indian or State Lease Number:

Complete the Attachment Checklist

Survey Plat	
Directional Survey	
Surface Eqpm't Diagram	
Technical Info Page	X
Other	

OP OGCC

RECEIVED
MAR 31 2011
COGCC/Rifle Office

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:	FNL/FSL	FEL/FWL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		

Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR
 Longitude _____ Distance to nearest lease line _____ is location in a High Density Area (rule 603b)? Yes/No [NO]
 Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____ NA

GPS DATA:

Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

CHANGE SPACING UNIT

Formation _____ Spacing order number _____ Unit configuration _____
 Remove from surface bond
 Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):

Effective Date: _____ From: _____ CHANGE WELL NAME _____ NUMBER _____
 Plugging Bond: Blanket Individual To: _____ Effective Date: _____

ABANDONED LOCATION:

Was location ever built? Yes No
 Is site ready for inspection? Yes No
 Date Ready for Inspection: _____
 NOTICE OF CONTINUED SHUT IN STATUS
 Date well shut in or temporarily abandoned: _____
 Has Production Equipment been removed from site? Yes No
 MIT required if shut in longer than two years. Date of last MIT _____

SPUD DATE:

REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

Method used _____ Cementing tool setting/perf depth _____ Cement volume _____ Cement top _____ Cement bottom _____ Date _____
 *submit cbl and cement job summaries

RECLAMATION:

Attach technical page describing final reclamation procedures per Rule 1004.
 Final reclamation will commence on approximately _____ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent
 Approximate Start Date: _____ Report of Work Done
 Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

Intent to Recomplete (submit form 2)
 Change Drilling Plans
 Gross Interval Changed?
 Casing/Cementing Program Change
 Request to Vent or Flare
 Repair Well
 Rule 502 variance requested
 Other: _____
 E&P Waste Disposal
 Beneficial Reuse of E&P Waste
 Status Update/Change of Remediation Plans
 for Spills and Releases

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

Signed: *Heather Mitchell* Date: 03/31/2011 Email: heather.mitchell@encana.com
 Print Name: Heather Mitchell Title: Regulatory Analyst

COGCC Approved: *[Signature]* Title: EITB Date: 4/1/2011

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED
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COGCC/Rifle Office

1. OGCC Operator Number: 100185 API Number: 05-045-18698-00
2. Name of Operator: Encana Oil & Gas (USA) Inc. OGCC Facility ID #
3. Well/Facility Name: N. Parachute Well/Facility Number: MF05A-16 H17 696
4. Location (Qtr, Sec, Twp, Rng, Meridian): SENE Sec 17 T6S-R96W, 6th PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

Encana requests permission to change the cement/casing design for the above referenced well

Production casing was originally permitted as follows:

Size of hole	Size of Csg	Wt per foot	Setting depth	Sxs Cement	Cmt bottom	Cmt top
7 7/8	4 1/2	11.6#	9124'	617	9124'	200' above WMFK

PRODUCTION CASING TO BE CHANGED TO THE FOLLOWING:

Size of hole	Size of Csg	Wt per foot	Setting depth	Sxs Cement	Cmt bottom	Cmt top
7 7/8	4 1/2	11.6#	4100'	477	4100'	200' into the surface

The casing will be run with packers spaced out 250'-300' apart throughout the Williams Fork with a DV tool above the top packer at approximately 100' into the Williams Fork. The hydraulic packers will be engaged by pressuring up on the casing after it is run in the hole. After setting the packers we plan to burst a rupture disk in the DV tool and cement through the DV tool into the surface casing so that the cement extends from 200' into the surface casing down to 100' into the Williams Fork. Below the DV tool there will be no cement behind the casing. We plan to drill out the DV tool before completing the well.