

**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



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Document Number:  
400169227

**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: 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-

5. API Number 05-045-19156-01 6. County: GARFIELD  
 7. Well Name: STORY GULCH UNIT Well Number: 8502A-25 F25496  
 8. Location: QtrQtr: SENW Section: 25 Township: 4S Range: 96W Meridian: 6  
 Footage at surface: Distance: 2271 feet Direction: FNL Distance: 1937 feet Direction: FWL  
 As Drilled Latitude: 39.674332 As Drilled Longitude: -108.119657

GPS Data:  
 Data of Measurement: 03/08/2010 PDOP Reading: 1.8 GPS Instrument Operator's Name: Brian Baker

\*\* If directional footage  
 at Top of Prod. Zone Distance: 592 feet Direction: FNL Distance: 1989 feet Direction: FEL  
 Sec: 25 Twp: 4S Rng: 96W  
 at Bottom Hole Distance: 681 feet Direction: FNL Distance: 2015 feet Direction: FEL  
 Sec: 25 Twp: 4S Rng: 96W

9. Field Name: WILDCAT 10. Field Number: 99999  
 11. Federal, Indian or State Lease Number: COC61136

12. Spud Date: (when the 1st bit hit the dirt) 05/11/2010 13. Date TD: 09/09/2010 14. Date Casing Set or D&A: 09/10/2010

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 12690 TVD 12343 17 Plug Back Total Depth MD 12642 TVD 12116

18. Elevations GR 8298 KB 8320 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	30	20	53	0	120	207	0	120	CALC
SURF	14+3/4	9+5/8	36	0	3,005	1,203	0	3,005	CALC
1ST	8+3/4	4+1/2	12	0	12,665	2,532	3,484	12,690	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	8,723	12,635	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	12,635	12,690	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Submitting information for the SGU 8502B-25 F25 496. For some reason your system is not recognizing the API of 05-045-19156-01 which I am filing the information for. This well is a Sidetrack of the SGU 8502A-25 F25 496. Spoke with Jane and she will look into. So when Jane is able to fix it on your side please make sure that the paperwork I am submitting which is the 5, 5A and 10 be changed to SGU 8502B-25 F25 496. Thanks, Marina

This well was Sidetracked please see the wellbore diagram attached with the Form 5A, Kickoff sidetrack 9/1/10 at 7,405'.

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: Permitting Technician

Date:

Email: marina.ayala@encana.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

### Attachment Check List

Att Doc Num	Name
400169262	PDF-MUD
400169269	LAS-CEMENT BOND
400169273	LAS-NEUTRON
400169275	DIRECTIONAL SURVEY
400169276	CEMENT JOB SUMMARY

Total Attach: 5 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)