

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
----	----	----	----

Document Number:

400170554

## 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  
2. Name of Operator: ENCANA OIL & GAS (USA) INC  
3. Address: 370 17TH ST STE 1700  
City: DENVER State: CO Zip: 80202-  
4. Contact Name: Judith Walter  
Phone: (720) 876-3702  
Fax: (720) 876-4702

5. API Number 05-045-18886-00  
6. County: GARFIELD  
7. Well Name: N.PARACHUTE Well Number: MF07D-9 E09 696  
8. Location: QtrQtr: SWNW Section: 9 Township: 6S Range: 96W Meridian: 6  
Footage at surface: Distance: 2708 feet Direction: FNL Distance: 757 feet Direction: FWL  
As Drilled Latitude: 39.539285 As Drilled Longitude: -108.118523

GPS Data:

Data of Measurement: 09/09/2010 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brian Baker

\*\* If directional footage

at Top of Prod. Zone Distance: 2764 feet Direction: FNL Distance: 1495 feet Direction: FEL  
Sec: 9 Twp: 6S Rng: 96W  
at Bottom Hole Distance: 2742 feet Direction: FNL Distance: 1438 feet Direction: FEL  
Sec: 9 Twp: 6S Rng: 96W

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) 11/07/2010 13. Date TD: 12/05/2010 14. Date Casing Set or D&A: 12/04/2010

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

16. Total Depth MD 9110 TVD 7844 17 Plug Back Total Depth MD 9062 TVD 7996

18. Elevations GR 5757 KB 5789 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 Logs. The RST & CBL .LAS file identified on the form as Cement Bond Log.

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	linepipe	0	160	189	0	160	CALC
SURF	12+1/4	9+5/8	36	0	1,518	353	0	1,518	CALC
1ST	8+3/4	4+1/2	11.6	0	9,088	1,317	2,245	9,091	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	5,499	8,940	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,941	9,110	<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: Judith Walter

Title: Regulatory Analyst Date: \_\_\_\_\_ Email: judith.walter@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
400170555	LAS-CEMENT BOND
400170556	LAS-MUD
400170557	DIRECTIONAL SURVEY
400170558	CEMENT JOB SUMMARY

Total Attach: 4 Files

### General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)