

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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 | Line pipe | 0 | 62 | | 0 | 40 | CALC |
| SURF | 12+1/4 | 9+5/8 | 36 | 0 | 1,011 | 319 | 0 | 1,011 | CALC |
| 2ND | 8+3/4 | 4+1/2 | 12 | 0 | 8,174 | 1,131 | 2,810 | 8,174 | 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 | 5,180 | 8,172 | <input type="checkbox"/> | <input type="checkbox"/> | |
| ROLLINS | 8,173 | 8,181 | <input type="checkbox"/> | <input type="checkbox"/> | |

Comment:

RST and CBL are contained in the same las document. All logs were uploaded using the file upload application. Uploading them via eforms was locking up the form. TOG: 5972'

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: 3/3/2011 Email: heather.mitchell@encana.com

Attachment Check List

| Att Doc Num | Document Name | attached ? | |
|-----------------------------|-----------------------|---|--|
| <u>Attachment Checklist</u> | | | |
| 400139309 | CMT Summary * | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | Core Analysis | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| 400139308 | 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> | | | |
| 400139305 | 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> |
|-------------------|----------------|---------------------|
| | | |

Total: 0 comment(s)