

FORM
5A

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:

2586820

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100185 4. Contact Name: SHEILA REED-HIGH
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3678
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4678
City: DENVER State: CO Zip: 80202-

5. API Number 05-123-32503-00 6. County: WELD
7. Well Name: EAST RINN Well Number: 2-8-15
8. Location: QtrQtr: NESW Section: 15 Township: 2N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: 03/23/2011 Date of First Production this formation: _____

Perforations Top: 7846 Bottom: 8520 No. Holes: 164 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

JSND-CDL-NBRR-COMMINGLE
SET CBP @ 7790'. 04-13-11. DRILLED OUT CBP @ 7790', CFP @ 7960', & 8200' TO COMMINGLE THE JSND-CDL-NBRR. 04-14-11

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 05/16/2011 Hours: 24 Bbls oil: 44 Mcf Gas: 240 Bbls H2O: 77

Calculated 24 hour rate: _____ Bbls oil: 44 Mcf Gas: 240 Bbls H2O: 77 GOR: 5455

Test Method: FLOWING Casing PSI: 1520 Tubing PSI: 657 Choke Size: 14/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1231 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8487 Tbg setting date: 04/14/2011 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: J SAND Status: PRODUCING

Treatment Date: 03/23/2011 Date of First Production this formation: _____

Perforations Top: 8494 Bottom: 8520 No. Holes: 52 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

J SAND CORPORATION
FRAC'D THE J-SAND 8494'-8520', (52 HOLES)W/ 153111 GAL 18# VISTAR HYBRID CROSS LINKED GET CONTAINING 250020 # 20/40 SAND. 03/23/11

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 03/24/2011 Date of First Production this formation: _____

Perforations Top: 7846 Bottom: 8088 No. Holes: 112 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole: ☐

CDL-NBRR COMPLETION
SET CFP @ 8200'. 03-23-11. FRAC'D THE CODELL 8068', (40 HOLES) W/ 108364 GAL 22# VISTAR HYBRID CROSS LINKED CONTAINING 250520 # 30/50 SAND. 03-23/11.
SEP CFP @ 7960'. 03-23-11. FRAC'D THE NIOBRARA 7876' - 7864' (72 HOLES), W/ 129478 GALS 18 # VISTAR HYBRID CROSS LINKED GEL CONTAINING 250020 # 30/50 SAND. 03/24/11

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

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

Signed: _____

Print Name: SHEILA REED-HIGH _____

Title: OPERATIONS TECHNOLOGIST _____

Date: 6/21/2011 _____

Email : SHEILA.REEDHIGH@ENCANA.COM _____

Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 2586820 | FORM 5A SUBMITTED |
| 2586821 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|-----------------------|----------------------------|
| | | |

Total: 0 comment(s)