

**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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COMPLETED INTERVAL REPORT

Document Number:

1947865

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: <u>100185</u>	4. Contact Name: <u>SHEILLA REED-HIGH</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(303) 623-2300</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(303) 623-2400</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-20522-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>HERREN</u>	Well Number: <u>32-33</u>
8. Location: QtrQtr: <u>SWNE</u> Section: <u>33</u> Township: <u>3N</u> Range: <u>67W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: _____ Date of First Production this formation: _____
Perforations Top: 7092 Bottom: 7786 No. Holes: 284 Hole size: 38/100

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

ALSO HOLES SIZE 42/100. // JSND-NBRR-CODL COMMINGLE. RELEASED RFP @7200'. RELEASED RBP @ 7423' TO COMMINGLE JSND-NBRR-CODL. 3/3/09

This formation is commingled with another formation: Yes No

Test Information:

Date: 03/08/2009 Hours: 24 Bbls oil: 16 Mcf Gas: 149 Bbls H2O: 18
Calculated 24 hour rate: Bbls oil: 16 Mcf Gas: 149 Bbls H2O: 18 GOR: 9312
Test Method: FLOWING Casing PSI: 767 Tubing PSI: 610 Choke Size: _____
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1276 API Gravity Oil: 53
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7720 Tbg setting date: 03/03/2009 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: 02/01/2009 Date of First Production this formation: _____
Perforations Top: 7092 Bottom: 7320 No. Holes: 108 Hole size: 42/100

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

NB-CD RE-FRAC & RECOMPLETN. SET RBP@ 7423'. REFRAC CODL W/111,972 GAL 24# VISTAR HYBRID CROSS LINKED GEL CONTAINING 251,080# 20/40 SD. SET RFP @ 7200'. REFRAC'D NBRR W/ 152,292 GAL 18# VISTAR X-LINKED GEL HYBRID CONTNING 250,240# 20/40 SD.

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: Y Print Name: SHEILLA REED-HIGH

Title: OPS TECH

Date: 4/7/2009

Email SHEILLA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	APPROVED AS PART OF OLD FORM 5A CLEANUP DOC #1947865	8/23/2011 4:56:39 PM

Total: 1 comment(s)