

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:

1947865

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

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: SHEILLA REED-HIGH

Phone: (303) 623-2300

Fax: (303) 623-2400

5. API Number 05-123-20522-00

7. Well Name: HERREN

8. Location: QtrQtr: SWNE Section: 33 Township: 3N Range: 67W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

6. County: WELD

Well Number: 32-33

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

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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)