

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:

400189095

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: Marina Ayala
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5905
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4905
City: DENVER State: CO Zip: 80202-

5. API Number 05-045-19551-00 6. County: GARFIELD
7. Well Name: TWIN CREEK Well Number: 12-1C1 (O1EB)
8. Location: QtrQtr: SWSE Section: 1 Township: 7S Range: 92W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING
Treatment Date: 04/29/2011 Date of First Production this formation: 06/16/2011
Perforations Top: 4482 Bottom: 6081 No. Holes: 189 Hole size: 0.34
Provide a brief summary of the formation treatment: Open Hole: ☐
Stages 1-7 treated with a total of: 95,098 bbls of Slickwater, 657,500 20-40 Sand.
This formation is commingled with another formation: ☐ Yes ☒ No
Test Information:
Date: 06/23/2011 Hours: 24 Bbls oil: 496 Mcf Gas: 1414 Bbls H2O: 366
Calculated 24 hour rate: Bbls oil: 496 Mcf Gas: 1414 Bbls H2O: 366 GOR: 2850
Test Method: Flowing Casing PSI: 1950 Tubing PSI: 1250 Choke Size: 24/64
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1170 API Gravity Oil: 54
Tubing Size: 2 + 3/8 Tubing Setting Depth: 5523 Tbg setting date: 06/06/2011 Packer Depth: 0
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: Marina Ayala

Title: Permitting Technician Date: 7/25/2011 Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Name
400189095	FORM 5A SUBMITTED
400189097	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	NEED EXPLANATION FROM OPERATOR RE BBL OIL.	8/19/2011 8:05:56 AM

Total: 1 comment(s)