

FORM
5
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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| DE | ET | OE | ES |
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Document Number:
400202991

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type Final completion Preliminary 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 05-045-19151-00 6. County: GARFIELD
 7. Well Name: GMR Well Number: 8-11A2 (K8W)
 8. Location: QtrQtr: NESW Section: 8 Township: 7S Range: 93W Meridian: 6
 Footage at surface: Distance: 1802 feet Direction: FSL Distance: 1944 feet Direction: FWL
 As Drilled Latitude: 39.457767 As Drilled Longitude: -107.799718

GPS Data:
 Data of Measurement: 06/02/2011 PDOP Reading: 2.6 GPS Instrument Operator's Name: Brandon Birdsall

** If directional footage
 at Top of Prod. Zone Distance: 2125 feet Direction: FSL Distance: 2362 feet Direction: FWL
 Sec: 8 Twp: 7S Rng: 93W
 at Bottom Hole Distance: 2085 feet Direction: FSL Distance: 2313 feet Direction: FWL
 Sec: 6 Twp: 7S Rng: 93W

9. Field Name: RULISON 10. Field Number: 75400
 11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 01/28/2011 13. Date TD: 04/11/2011 14. Date Casing Set or D&A: 04/12/2011

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 9877 TVD 9854 17 Plug Back Total Depth MD 9819 TVD 9796

18. Elevations GR 7826 KB 7857 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:
Triple Combo (Includes RST & CBL) and Mud

20. Casing, Liner and Cement:

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 | 42 | 0 | 60 | 40 | 0 | 40 | CALC |
| SURF | 12+1/4 | 9+5/8 | 36 | 0 | 1,260 | 418 | 0 | 1,260 | CALC |
| 1ST | 8+3/4 | 4+1/2 | 12 | 0 | 9,861 | 1,105 | 4,790 | 9,877 | 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 | 6,188 | 9,877 | <input type="checkbox"/> | <input type="checkbox"/> | |

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: _____ Email: marina.ayala@encana.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

| Att Doc Num | Name |
|-------------|------------------------|
| 400203040 | LAS-TRIPLE COMBINATION |
| 400203046 | PDF-MUD |
| 400203047 | DIRECTIONAL SURVEY |
| 400203048 | CEMENT JOB SUMMARY |

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)