

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



Table with 4 columns: DE, ET, OE, ES

COMPLETED INTERVAL REPORT

Document Number: 2587613

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: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-013-06636-00
6. County: BOULDER
7. Well Name: WIGGETT
Well Number: 2-4-13
8. Location: QtrQtr: NWNW Section: 13 Township: 1N Range: 69W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: Date of First Production this formation:

Perforations Top: 7738 Bottom: 8600 No. Holes: 32 Hole size:

Provide a brief summary of the formation treatment: Open Hole: [ ]

JSND-CDL-NBRR COMMINGLE: SET CBP @ 7680'. 06/15/11. DRILLED OUT CBP @ 7680', CFP @ 8250' AND 7380' TO COMMINGLE THE JSND-CDL-NBRR. 06/16/11.

This formation is commingled with another formation: [ ] Yes [X] No

Test Information:

Date: 06/21/2011 Hours: 24 Bbls oil: 44 Mcf Gas: 251 Bbls H2O: 75

Calculated 24 hour rate: Bbls oil: 44 Mcf Gas: 251 Bbls H2O: 75 GOR: 5705

Test Method: FLOWING Casing PSI: 1997 Tubing PSI: 1063 Choke Size:

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1177 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8546 Tbg setting date: 06/16/2011 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: 05/09/2011 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 8584 Bottom: 8600 No. Holes: 32 Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

J SAND COMPLETION. FRAC'D THE J-SAND 8584'-8600', (32 HOLES) W/156,366 GAL 19 # PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 250,640 # 20/40 SAND. 05/09/11.

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: 05/10/2011 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 7738 Bottom: 8158 No. Holes: 172 Hole size: \_\_\_\_\_

Provide a brief summary of the formation treatment: \_\_\_\_\_ Open Hole:

CDL-NBRR COMPLETION. SET CFP @ 8250'. 05/10/11. FRAC'D THE CODELL 8140'-8158' (36 HOLES) W/115,752 GAL 22 # PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 250,960 # 20/40 SAND. 05/10/11. SET CFP @ 7380'. 05/10/11. FRAC'D THE NIOBRARA 7738'-7752', 7904'-7924' (136 HOLES) W/130,411 GALS 18# PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 249,460 # 30/50 SAND. 05/10/11.

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: SHEILLA REED-HIGH

**Attachment Check List**

Att Doc Num	Name
2587613	FORM 5A SUBMITTED
2587614	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)