

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:

1636122

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: JOYCE MCGOUGH  
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5296  
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6060  
City: DENVER State: CO Zip: 80202-

5. API Number 05-077-09421-00 6. County: MESA  
7. Well Name: FEDERAL Well Number: 13-4 (OH14)  
8. Location: QtrQtr: SENE Section: 14 Township: 8S Range: 97W Meridian: 6  
9. Field Name: \_\_\_\_\_ Field Code: \_\_\_\_\_

Completed Interval

FORMATION: COZZETTE Status: PRODUCING

Treatment Date: 09/09/2008 Date of First Production this formation: \_\_\_\_\_  
Perforations Top: 5045 Bottom: 5171 No. Holes: 27 Hole size: 34/100

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

STAGES 02 TREATED WITH A TOTAL OF 5453 BBLs OF SLICKWATER AND 224,400 LBSA 20-40 SAND.

This formation is commingled with another formation: ☐ Yes ☒ No

**Test Information:**

Date: 09/18/2008 Hours: 24 Bbls oil: 0 Mcf Gas: 50 Bbls H2O: 84  
Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: 50 Bbls H2O: 84 GOR: 0  
Test Method: FLOWING Casing PSI: 1500 Tubing PSI: 650 Choke Size: 24  
Gas Disposition: SOLD Gas Type: \_\_\_\_\_ BTU Gas: 1170 API Gravity Oil: 0  
Tubing Size: 2 + 3/8 Tubing Setting Depth: 4460 Tbg setting date: 09/17/2008 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: CORCORAN Status: PRODUCING

Treatment Date: 09/09/2008 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 5266 Bottom: 5326 No. Holes: 27 Hole size: 34/100

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

STAGES 01 TREATED WITH A TOTAL OF 4821 BBLS OF SLICKWATER AND 178,400 LBS 20-40 SAND.

This formation is commingled with another formation: ☐ Yes ☒ No

**Test Information:**

Date: 09/18/2008 Hours: 24 Bbls oil: 0 Mcf Gas: 100 Bbls H2O: 168

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: 100 Bbls H2O: 168 GOR: \_\_\_\_\_

Test Method: FLOWING Casing PSI: 1500 Tubing PSI: 650 Choke Size: 24

Gas Disposition: SOLD Gas Type: \_\_\_\_\_ BTU Gas: 1170 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 4460 Tbg setting date: 09/17/2008 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: WILLIAMS FORK Status: PRODUCING

Treatment Date: 09/09/2008 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 3625 Bottom: 4717 No. Holes: 108 Hole size: 0.34

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

STAGES 03-06 TREATED WITH A TOTAL OF 15,904 BBLS OF SLICKWATER AND 654,200 LBS 20-40 SAND.

This formation is commingled with another formation: ☐ Yes ☒ No

**Test Information:**

Date: 09/18/2008 Hours: 24 Bbls oil: 0 Mcf Gas: 350 Bbls H2O: 588

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: \_\_\_\_\_ Mcf Gas: 350 Bbls H2O: 588 GOR: \_\_\_\_\_

Test Method: FLOWING Casing PSI: 1500 Tubing PSI: 650 Choke Size: 24

Gas Disposition: \_\_\_\_\_ Gas Type: \_\_\_\_\_ BTU Gas: 1170 API Gravity Oil: 48

Tubing Size: 2 + 3/8 Tubing Setting Depth: 4460 Tbg setting date: 09/17/2008 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: JOYCE MCGOUGH

Title: REGULATORY Date: 10/17/2008 Email: JOYCE.MCGOUGH@ENCANA.COM

### Attachment Check List

Att Doc Num	Name
1636122	FORM 5A SUBMITTED
1636123	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Cmt Summary and DS rec'd and attached to form 5 Doc #1636121.	9/16/2011 10:36:28 AM
Permit	Opr contact has changed to RuthAnn Morss @ EnCana. Needs cement summary, and new directional.	3/4/2011 2:47:13 PM

Total: 2 comment(s)