

FORMATION: J SAND Status: PRODUCING

Treatment Date: 05/27/2011 Date of First Production this formation: _____

Perforations Top: 8188 Bottom: 5208 No. Holes: 40 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

J SAND COMPLETION
FRAC'D THE J-SAND 8188'-8208', (40 HOLES) W/154,686 GAL 19# PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 251,760# 20/40 SAND. 05-27-11

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: 05/28/2011 Date of First Production this formation: _____

Perforations Top: 7516 Bottom: 7760 No. Holes: 120 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

CDL-NBRR COMPLETION
SET CFP@7850'. FRAC'D THE CODELL 7740'-7760' (40 HOLES) W/110,208 GAL 21# PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 250,300# 20/40 SAND. 05-28-11
SET CFP@7630'. FRAC'D THE NIOBRARA W/145,488 GALS 18# PHASERFRAC HYBRID CROSS LINKED GEL CONTAINING 250,080# 20/40 SAND. 05/28/11

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

Title: OPERATIONS TECHNOLOGIST

Date: 8/31/2011

Email: SHEILLA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Name
2588379	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)