

**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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COMPLETED INTERVAL REPORT

Document Number:
2506653

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: <u>100185</u>	4. Contact Name: <u>JANE WASHBURN</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-5431</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-6431</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-15070-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>RANCHERO</u>	Well Number: <u>32-34</u>
8. Location: QtrQtr: <u>SWNE</u> Section: <u>34</u> Township: <u>2N</u> Range: <u>66W</u> Meridian: <u>6</u>	
9. Field Name: <u>SPINDLE</u> Field Code: <u>77900</u>	

Completed Interval

FORMATION: NIOBRARA-CODELL

Status: PRODUCING

Treatment Date: 04/10/2010

Date of First Production this formation: _____

Perforations Top: 7274 Bottom: 7518 No. Holes: 148 Hole size: _____

Provide a brief summary of the formation treatment:

Open Hole:

NBRR-PERFED 7274-7294, 4 SPF, 80 HOLES. FRAC'D W/250,280# SAND AND 135,828 GAL FRAC FLUID
CD-RE-FRAC'D 7501-7518' W/250,380# SAND AND 118,776 GAL FRAC FLUID
CIBP SET @ 7344' ON 4/12/10; DRILLED OUT 4/23/10.

This formation is commingled with another formation: Yes No**Test Information:**

Date: 06/25/2010 Hours: 24 Bbls oil: 20 Mcf Gas: 8 Bbls H2O: 5

Calculated 24 hour rate: Bbls oil: 20 Mcf Gas: 8 Bbls H2O: 5 GOR: 400

Test Method: FLOWING Casing PSI: 996 Tubing PSI: 139 Choke Size: 64/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 43

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7496 Tbg setting date: 04/26/2010 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: SUSSEX

Status: ABANDONED COMPLETION

Treatment Date: 03/29/2010

Date of First Production this formation: _____

Perforations Top: 4743 Bottom: 4778 No. Holes: 70 Hole size: _____

Provide a brief summary of the formation treatment:

Open Hole:

SQUEEZED SUSSEX PERFS 4743-4778 W/ 150 XS CLASS G CMT. DRILLED OUT CMT FROM 4510 TO 4790. (3/29/10)
RBP SET AT 4960' ON 3/26/10 AND DRILLED OUT ON 4/5/10.

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:

ABANDONED

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: JANE WASHBURN

Attachment Check List

Att Doc Num	Name
2506653	FORM 5A SUBMITTED
2506654	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)