

FORM
5Rev
02/08State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400214152

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

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: Marina Ayala

Phone: (720) 876-5905

Fax: (720) 876-6905

5. API Number 05-045-20022-00

6. County: GARFIELD

7. Well Name: ROSE RANCH

Well Number: 23-6C1 (A22W)

8. Location: QtrQtr: NENE Section: 22 Township: 7S Range: 93W Meridian: 6

Footage at surface: Distance: 769 feet Direction: FNL Distance: 443 feet Direction: FEL

As Drilled Latitude: 39.436329 As Drilled Longitude: -107.752868

GPS Data:

Data of Measurement: 03/03/2011 PDOP Reading: 2.8 GPS Instrument Operator's Name: Brandon Birdsall

** If directional footage

at Top of Prod. Zone Distance: 2510 feet Direction: FNL Distance: 1732 feet Direction: FWL

Sec: 23 Twp: 7S Rng: 93W

at Bottom Hole Distance: 2503 feet Direction: FNL Distance: 1727 feet Direction: FWL

Sec: 23 Twp: 7S Rng: 93W

9. Field Name: MAMM CREEK

10. Field Number: 52500

11. Federal, Indian or State Lease Number: COC055972E

12. Spud Date: (when the 1st bit hit the dirt) 11/27/2010 13. Date TD: 01/10/2011 14. Date Casing Set or D&A: 01/12/2011

15. Well Classification:

☐ Dry ☐ Oil ☒ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 9440 TVD 8809 17 Plug Back Total Depth MD 9365 TVD 8734

18. Elevations GR 6790 KB 6812

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:

RSS, CBL (same log) 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	40	40	0	40	CALC
SURF	12+1/4	9+5/8	36	0	1,485	463	0	1,485	CALC
1ST	8+3/4	4+1/2	12	0	9,440	860	4,740	9,440	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	5,585	9,133	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,134	9,440	<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
400214173	PDF-MUD
400214177	LAS-NEUTRON
400214178	DIRECTIONAL SURVEY
400214179	CEMENT JOB SUMMARY

Total Attach: 4 Files

General Comments

User Group Comment Comment Date

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Total: 0 comment(s)