

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:
2588528

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 05-123-31206-00
6. County: WELD
7. Well Name: FOSTER
Well Number: 4-6-5
8. Location: QtrQtr: SESE Section: 5 Township: 1N Range: 68W 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: 7740 Bottom: 8446 No. Holes: 156 Hole size:

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

JSND-CDL-NBRR COMMINGLE
SET CBP @ 7600'. 06-26-11. DRILLED OUT CBP @ 7600'. CFP @ 7850' AND 8100' TO COMMINGLE THE JSND-CDL-NBRR.
06-28-11.

This formation is commingled with another formation: Yes No

Test Information:

Date: 05/30/2011 Hours: 24 Bbls oil: 42 Mcf Gas: 100 Bbls H2O: 44

Calculated 24 hour rate: Bbls oil: 42 Mcf Gas: 100 Bbls H2O: 44 GOR: 2381

Test Method: FLOWING Casing PSI: 1841 Tubing PSI: 756 Choke Size:

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1175 API Gravity Oil: 49

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8415 Tbg setting date: 06/28/2011 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: 06/06/2011 Date of First Production this formation: _____

Perforations Top: 8428 Bottom: 8446 No. Holes: 36 Hole size: _____

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

J SAND COMPLETION
FRAC'D THE J-SAND 8428'-8446', (36 HOLES) W/ 153,859 GAL 18# VISTAR HYBRID CROSS LINKED GAL CONTAINING 254,377# 20/40 SAND. 06-06-11

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: 06/09/2011 Date of First Production this formation: _____

Perforations Top: 7740 Bottom: 8010 No. Holes: 120 Hole size: _____

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

CDL-NBRR COMPLETION
SET CFP @ 8100'. 06-08-11. FRAC'D THE CODELL 7990'-8010' (40 HOLES) W/ 108,318 GAL 23# VISTAR HYBRID CROSSED LINKED GEL CONTAINING 251,801# 20/40 SAND. 06-09-11
SET CFP @ 7850'. 06-09-11. FRAC'D THE NIOBRARA 7740'-7760' (80 HOLES), W/ 125,832 GALS 18# VISTAR HYBRID CROSS LINKED GEL CONTAINING 225,402# 20/40 SAND 06-09-11

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: _____

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 D REED-HIGH
 Title: OPERATIONS TECHNOLOGIST Date: 8/29/2011 Email SHEILLA.REEDHIGH@ENCANA.COM
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Attachment Check List

Att Doc Num	Name
2588528	FORM 5A SUBMITTED
2588529	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)