

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:  
2507675

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 &amp; 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>05-123-26124-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>ARISTOCRAT ANGUS</u>	Well Number: <u>6-8-4</u>
8. Location: QtrQtr: <u>SWSE</u> Section: <u>4</u> Township: <u>3N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>ARISTOCRAT</u> Field Code: <u>2925</u>	

**Completed Interval**

FORMATION: J-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: \_\_\_\_\_ Date of First Production this formation: \_\_\_\_\_

Perforations Top: 6972 Bottom: 7714 No. Holes: 160 Hole size: \_\_\_\_\_

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

**DRILLED OUT CFP @ 7060 AND CIBP @ 5/10/2011. TUBING WAS SET @ 7651 ON 5/10/2011. COMMINGLED ON 5/13/11.**

This formation is commingled with another formation:  Yes  No

**Test Information:**

Date: 05/24/2011 Hours: 4 Bbls oil: 2 Mcf Gas: 27 Bbls H2O: 1

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 14 Mcf Gas: 185 Bbls H2O: 7 GOR: 13214

Test Method: FLOW TEST Casing PSI: 568 Tubing PSI: 462 Choke Size: 22/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7651 Tbg setting date: 05/10/2011 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: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 04/22/2011 Date of First Production this formation: \_\_\_\_\_

Perforations Top: 6972 Bottom: 7222 No. Holes: 128 Hole size: \_\_\_\_\_

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

**FRAC'D THE NBRR WITH 137382 GAL FRAC FLUID AND 250020# SAND.  
FRAC'D THE CD WITH 120372 GAL FRAC FLUID AND 249520# SAND.**

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: JANE WASHBURN

**Attachment Check List**

Att Doc Num	Name
2507675	FORM 5A SUBMITTED
2507676	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

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

Total: 0 comment(s)