

FORM  
5

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



DE ET OE ES

Document Number:  
2612652

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: NICHOLAS RONAN  
Phone: (720) 876-3838  
Fax: (720) 876-4838

5. API Number 05-045-11639-00  
6. County: GARFIELD  
7. Well Name: N. PARACHUTE  
Well Number: EF12B L29 595  
8. Location: QtrQtr: NWSW Section: 29 Township: 5S Range: 95W Meridian: 6  
Footage at surface: Distance: 1952 feet Direction: FNL Distance: 462 feet Direction: FWL  
As Drilled Latitude: 39.582900 As Drilled Longitude: -108.085753

GPS Data:  
Date of Measurement: 07/23/2007 PDOP Reading: 2.6 GPS Instrument Operator's Name: ROBERT KAY

\*\* If directional footage at Top of Prod. Zone Dist.: 2391 feet. Direction: FSL Dist.: 450 feet. Direction: FWL  
Sec: 29 Twp: 5S Rng: 95W  
\*\* If directional footage at Bottom Hole Dist.: 2365 feet. Direction: FSL Dist.: 429 feet. Direction: FWL  
Sec: 29 Twp: 5S Rng: 95W

9. Field Name: WILDCAT 10. Field Number: 99999  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 06/06/2006 13. Date TD: 06/20/2006 14. Date Casing Set or D&A: 06/22/2006

15. Well Classification:  
 Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 9420 TVD\*\* 9412 17 Plug Back Total Depth MD 9353 TVD\*\* 9345

18. Elevations GR 5983 KB 6000  
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:  
MUD, CBL AND ARRAY INDUCTION.

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	22	20		0	85	30	0	85	VISU
SURF	12+1/4	9+5/8	36	0	2,550	660	0	2,550	VISU
1ST	8+3/4	4+1/2	11.6	0	9,400	1,510	2,240	9,400	CBL

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

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	5,638	9,188	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	9,188	9,420	<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: NICHOLAS RONAN

Title: ENGINEERING TECHNICIAN Date: 7/25/2007 Email: NICHOLAS.RONAN@ENCANA.COM

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
	CMT Summary *	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2111458	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
2111459	WELLBORE DIAGRAM	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2612652	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

User Group	Comment	Comment Date
Permit	Per N. Ronan 9/30/2011, re log headers: The API number is correct: 05-045-11639, Correct well name: N Parachute EF12B L29 595, Correct surface location footages: 1952' FSL ; 462' FWL. NKP	9/30/2011 3:56:05 PM
Permit	Paper CBL and mud rcd., not yet scanned. Well was completed prior to cement ticket rqmt. Paper log headers (surface loc) don't match well file. Email to operator 9/1/2011 NKP	9/1/2011 8:04:04 AM
Permit	No LAS or paper format logs (resistivity, mud, CBL). No cement ticket. Checking with engineering for paper well file. NKP	7/21/2011 10:44:01 AM

Total: 3 comment(s)