

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:

400216184

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: Heather Mitchell  
Phone: (720) 876-3070  
Fax: (720) 876-4070

5. API Number 05-045-18870-00  
6. County: GARFIELD  
7. Well Name: N. Parachute  
Well Number: WF15A-22 K22 59  
8. Location: QtrQtr: NESW Section: 22 Township: 5S Range: 96W Meridian: 6  
Footage at surface: Distance: 2179 feet Direction: FSL Distance: 1798 feet Direction: FWL  
As Drilled Latitude: 39.599363 As Drilled Longitude: -108.158388

GPS Data:  
Date of Measurement: 01/07/2010 PDOP Reading: 3.1 GPS Instrument Operator's Name: Ben Johnson

\*\* If directional footage at Top of Prod. Zone Dist.: 1274 feet. Direction: FSL Dist.: 2610 feet. Direction: FEL  
Sec: 22 Twp: 5S Rng: 96W  
\*\* If directional footage at Bottom Hole Dist.: 1190 feet. Direction: FSL Dist.: 2569 feet. Direction: FEL  
Sec: 22 Twp: 5S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/19/2010 13. Date TD: 10/24/2010 14. Date Casing Set or D&A: 10/25/2010

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

16. Total Depth MD 9090 TVD\*\* 8922 17 Plug Back Total Depth MD 9035 TVD\*\* 8867

18. Elevations GR 6528 KB 6528  
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:  
RST & CBL in the same file

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	Linepipe	0	120	221	0	120	CALC
SURF	12+1/4	9+5/8	36	0	1,696	439	0	1,693	CALC
2ND	8+3/4	4+1/2	12	0	9,063	1,254	1,322	8,950	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	5,548	8,966	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	8,967	9,090	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

RST & CBL in the same file. TOG: 5625'

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Heather Mitchell

Title: Regulatory Analyst Date: 10/19/2011 Email: heather.mitchell@encana.com

**Attachment Check List**

Att Doc Num	Document Name	attached ?	
<b><u>Attachment Checklist</u></b>			
400216192	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400216191	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b><u>Other Attachments</u></b>			
400216184	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400216187	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	REC HARD COPY LOGS DOC#1671201-03 , IN SCANNING	10/24/2011 10:23:37 AM
Permit	WAITING ON DIGITAL AND HARD COPY LOGS	10/19/2011 3:44:14 PM

Total: 2 comment(s)