

FORM
22
Rev 5/99

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



FOR OGCC USE ONLY

ACCIDENT REPORT

As required by Rule 602.b.

Report taken by:

DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Name of Operator: EnCana Oil and Gas
Date of Incident: 11/15/2011
Type of Facility (well, tank battery, flow line, pit): well site
Well Name & Number: EF01A-34 P27 595
API Number: 05045202980000
Connect to Accident (land owner, royalty owner, etc.): Encana property

Location NPR EF P27	
County: Garfield	
Field Name: NPR	
QtrQtr: SESE	Section: 27
Township: 5S	Range: 95 w
Meridian: 6th	

Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):

IE Was reaching down to Grab a cable from hanging up when it caught and bounced up causing chiev to strike employee under chin causing a small cut that needed 3 stitches Patterson UTI 303

Other Notifications

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

Incident tracking number 2011-01813