

Document Number:  
 400227839

**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 4. Contact Name: Marina Ayala  
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5905  
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6905  
 City: DENVER State: CO Zip: 80202-

5. API Number 05-045-19770-00 6. County: GARFIELD  
 7. Well Name: SGU Well Number: 8513F-24 F25 49  
 8. Location: QtrQtr: SENW Section: 25 Township: 4S Range: 96W Meridian: 6  
 Footage at surface: Distance: 2259 feet Direction: FNL Distance: 1953 feet Direction: FWL  
 As Drilled Latitude: 39.674369 As Drilled Longitude: -108.119595

GPS Data:  
 Date of Measurement: 11/16/2011 PDOP Reading: 2.4 GPS Instrument Operator's Name: Brandon Birdsall

\*\* If directional footage at Top of Prod. Zone Dist.: 16 feet. Direction: FSL Dist.: 659 feet. Direction: FWL  
 Sec: 24 Twp: 4S Rng: 96W  
 \*\* If directional footage at Bottom Hole Dist.: 33 feet. Direction: FSL Dist.: 667 feet. Direction: FWL  
 Sec: 24 Twp: 4S Rng: 96W

9. Field Name: WILDCAT 10. Field Number: 99999  
 11. Federal, Indian or State Lease Number: COC61136

12. Spud Date: (when the 1st bit hit the dirt) 01/05/2011 13. Date TD: 03/30/2011 14. Date Casing Set or D&A: 03/31/2011

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

16. Total Depth MD 12790 TVD\*\* 12345 17 Plug Back Total Depth MD 12740 TVD\*\* 12295

18. Elevations GR 8298 KB 8320  
 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 (Triple Combo SCMT\_RST\_PSP) and Mud.

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	30	20	53	0	120	207	0	120	CALC
SURF	14+3/4	9+5/8	36	0	3,014	1,127	0	3,040	CALC
1ST	8+3/4	4+1/2	12	0	12,764	2,182	5,960	12,790	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	8,617	12,669	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	12,670	12,790	<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: Marina Ayala

Title: Permitting Technician Date: \_\_\_\_\_ Email: marina.ayala@encana.com

The subreport 'subreport3' could not be found at the specified location W:\Inetpub\Net\Reports\AttachListNew.rdlc. Please

**General Comments**

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

Total: 0 comment(s)