

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



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Document Number:

400217618

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 05-045-11626-00 6. County: GARFIELD
 7. Well Name: N. PARACHUTE Well Number: EF14B D28 595
 8. Location: QtrQtr: NWNW Section: 28 Township: 5S Range: 95W Meridian: 6
 Footage at surface: Distance: 1277 feet Direction: FNL Distance: 852 feet Direction: FWL
 As Drilled Latitude: 39.588565 As Drilled Longitude: -108.065636

GPS Data:

Date of Measurement: 10/07/2011 PDOP Reading: 2.8 GPS Instrument Operator's Name: Brandon Birdsall

** If directional footage at Top of Prod. Zone Dist.: 1122 feet. Direction: FSL Dist.: 1690 feet. Direction: FWL

Sec: 28 Twp: 5S Rng: 95W

** If directional footage at Bottom Hole Dist.: 890 feet. Direction: FSL Dist.: 1665 feet. Direction: FWL

Sec: 28 Twp: 5S Rng: 95W

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) 07/10/2007 13. Date TD: 07/24/2007 14. Date Casing Set or D&A: 07/26/2007

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 10450 TVD** 9659 17 Plug Back Total Depth MD 10389 TVD** 9598

18. Elevations GR 6194 KB 6216

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:

CBL 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	20	16	53	0	142	6	0	142	CALC
SURF	12+1/4	9+5/8	36	0	2,532	660	0	2,542	CALC
1ST	7+7/8	4+1/2	12	0	10,436	1,289	6,700	10,450	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
SQUEEZE	1ST	6,506	200	1,949	10,450

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	6,601	10,277	<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	10,278	10,450	<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Uploaded Encana's Direction Survey. Back in 2007 we did not have to send the Final Survey from Cathedral, therefore Encana does not have a copy. Please let me know if you have any questions.
Thank,
Marina

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: 10/24/2011 Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
400217628	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2072740	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"/>
Other Attachments			
400217618	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400217622	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400217629	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400217631	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	REC HARD COPY LOGS DOC#1671337-40 , IN SCANNING	10/27/2011 8:40:48 AM
Permit	waiting on logs and D/S	10/26/2011 7:51:23 AM

Total: 2 comment(s)