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 **DRILLING COMPLETION REPORT**		DE	ET	OE	ES

		Document Number:
		400220278

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: Marina Ayala

Phone: (720) 876-5905

Fax: (720) 876-6905

5. API Number   05-045-19823-00

6. County: GARFIELD

7. Well Name: SGU   Well Number: 8502D-36 B36496

8. Location: QtrQtr: Lot 2   Section: 36   Township: 4S   Range: 96W   Meridian: 6

Footage at surface: Distance: 801   feet   Direction: FNL   Distance: 1662   feet   Direction: FEL

As Drilled Latitude: 39.663864   As Drilled Longitude: -108.113589

GPS Data:

Data of Measurement: 10/18/2011   PDOP Reading: 1.8   GPS Instrument Operator's Name: Brandon Birdsall

** If directional footage at Top of Prod. Zone   Dist.:   1211   feet. Direction: FNL   Dist.:   2012   feet. Direction: FEL

Sec: 36   Twp: 4S   Rng: 96W

** If directional footage at Bottom Hole   Dist.:   1230   feet. Direction: FNL   Dist.:   2024   feet. Direction: FEL

Sec: 36   Twp: 4S   Rng: 96W

9. Field Name: WILDCAT   10. Field Number: 99999

11. Federal, Indian or State Lease Number: COC65557

12. Spud Date: (when the 1st bit hit the dirt)   11/15/2010   13. Date TD: 04/19/2011   14. Date Casing Set or D&A: 04/21/2011

15. Well Classification:

☐ Dry   ☐ Oil   ☒ Gas/Coalbed   ☐ Disposal   ☐ Stratigraphic   ☐ Enhanced Recovery   ☐ Storage   ☐ Observation

16. Total Depth   MD   12136   TVD** 12116   17 Plug Back Total Depth   MD   12080   TVD** 12060

18. Elevations   GR   8352   KB   8374   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) 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	3,026	1,108	0	306	CALC
1ST	8+3/4	4+1/2	12	0	12,103	2,039	3,796	12,136	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	8,405	12,004	☐	☐	
ROLLINS	12,005	12,136	☐	☐	

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: 11/2/2011   Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Document Name	attached ?			

Attachment Checklist

Att Doc Num	Document Name				
400220284	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400220283	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒

Other Attachments

Att Doc Num	Document Name				
400220278	FORM 5 SUBMITTED	Yes	☒	No	☐
400220281	PDF-MUD	Yes	☒	No	☐
400220282	LAS-TRIPLE COMBINATION	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)