

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:  
2285194

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: SHEILLA REED-HIGH  
Phone: (720) 876-3678  
Fax: (720) 876-4678

5. API Number 05-123-32172-00  
6. County: WELD  
7. Well Name: RODMAN BRUNTZ Well Number: 11-26  
8. Location: QtrQtr: SWNW Section: 26 Township: 2N Range: 66W Meridian: 6  
Footage at surface: Distance: 1619 feet Direction: FNL Distance: 961 feet Direction: FWL  
As Drilled Latitude: 40.112039 As Drilled Longitude: -104.750622

GPS Data:  
Date of Measurement: 09/20/2011 PDOP Reading: 2.9 GPS Instrument Operator's Name: PAT LINDERHOLM

\*\* If directional footage at Top of Prod. Zone Dist.: 654 feet. Direction: FNL Dist.: 643 feet. Direction: FWL  
Sec: 26 Twp: 2N Rng: 66W  
\*\* If directional footage at Bottom Hole Dist.: 637 feet. Direction: FNL Dist.: 628 feet. Direction: FWL  
Sec: 26 Twp: 2N Rng: 66W

9. Field Name: WATTENBERG 10. Field Number: 90750  
11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 08/12/2011 13. Date TD: 08/16/2011 14. Date Casing Set or D&A: 08/18/2011

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

16. Total Depth MD 8267 TVD\*\* 8135 17 Plug Back Total Depth MD 8210 TVD\*\* 8078

18. Elevations GR 5075 KB 5087  
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, DUAL IND/COMPENSATED DENSITY/COMPENSATED NEUTRON

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
SURF	12+1/4	8+5/8		0	1,134	430	0	1,134	VISU
1ST	7+7/8	4+1/2		0	8,252	602	4,320	8,252	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	
SUSSEX	4,789		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,378		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,666		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,124		<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: SHEILLA REED-HIGH

Title: OPERATIONS Date: 9/23/2011 Email: SHEILLA.REEDHIGH@ENCANA.COM

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
2285196	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2285195	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 type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
2285194	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

### General Comments

User Group	Comment	Comment Date
Permit	REQ MWD/FMI LOGS	11/21/2011 9:27:36 AM

Total: 1 comment(s)