

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 columns: DE, ET, OE, ES

Document Number: 400232352

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of 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 05-045-19899-00
6. County: GARFIELD
7. Well Name: DAYBREAK FEDERAL
Well Number: 19-5 (PJ-19)
8. Location: QtrQtr: NWSE Section: 19 Township: 7S Range: 95W Meridian: 6
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING

Treatment Date: 10/25/2011 Date of First Production this formation: 11/14/2011

Perforations Top: 4716 Bottom: 6709 No. Holes: 216 Hole size: 0.34

Provide a brief summary of the formation treatment: Open Hole: []

Stages 1-8 treated with a total of: 71,381 bbls of Slickwater.

This formation is commingled with another formation: [] Yes [X] No

Test Information:

Date: 11/21/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 48 Bbls H2O: 619

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 48 Bbls H2O: 619 GOR: 0

Test Method: Flowing Casing PSI: 950 Tubing PSI: Choke Size: 24/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1170 API Gravity Oil: 0

Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production:

[]

Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

Comment:

Tubing not landed on this well. Will send in another Form 5A when tubing is landed in January 2012.

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: 12/14/2011 Email marina.ayala@encana.com

Attachment Check List

Att Doc Num	Name
400232352	FORM 5A SUBMITTED
400232361	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	off hold--form 5 approved.	12/21/2011 3:45:44 PM
Permit	on hold pending approval of form 5.	12/14/2011 1:41:38 PM

Total: 2 comment(s)