

FORM
5A

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:

1771650

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: Ruthann Morss
Phone: (720) 876-5060
Fax: (720) 876-6060

5. API Number 05-045-09363-00
6. County: GARFIELD
7. Well Name: MCPHERSON
Well Number: 1-16C (P1SE)
8. Location: QtrQtr: SESE Section: 1 Township: 8S Range: 92W Meridian: 6
9. Field Name: ALKALI CREEK Field Code: 1950

Completed Interval

FORMATION: WILLIAMS FORK Status: TEMPORARILY ABANDONED

Treatment Date: 10/24/2011 Date of First Production this formation:
Perforations Top: 4541 Bottom: 4570 No. Holes: 128 Hole size: 43/100

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set plug over fish in hole.

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: Hours: Bbls oil: Mcf Gas: Bbls H2O:
Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: BTU Gas: API Gravity Oil:
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production:

Tubing stuck in hole, cut off at 4090 (see MIT Doc # 1771649).

Date formation Abandoned: 10/24/2011 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt

Bridge Plug Depth: 4060 Sacks cement on top: 0

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: Print Name: Ruthann Morss

Title: Regulatory Analyst Date: 11/21/2011 Email: ruthann.morss@encana.com

Attachment Check List

Att Doc Num	Name
1771650	FORM 5A SUBMITTED
2329567	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Reason for non-production pulled from MIT Doc # 1771649. Requested new Form 5, current one does not show liner and does not reflect deepening. Passed MIT on 11/10/2011.	12/6/2011 7:57:20 AM

Total: 1 comment(s)