

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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COMPLETED INTERVAL REPORT

Document Number:
2286025

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: <u>100185</u>	4. Contact Name: <u>JANE WASHBURN</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-5431</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-6431</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-22396-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>ARISTOCRAT ANGUS</u>	Well Number: <u>1-2-10</u>
8. Location: QtrQtr: <u>NWNW</u> Section: <u>10</u> Township: <u>3N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: GREENHORN-NIOBRARA-CODELL Status: COMMINGLED

Treatment Date: _____ Date of First Production this formation: _____

Perforations Top: 6964 Bottom: 7390 No. Holes: 400 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

CIBP SET @ 7300 ON 6/29/2011; DRILLED OUT ON 7/16/2011. CFP SET @ 7070 ON 6/29/2011 AND DRILLED OUT ON 7/15/2011. WELL WAS TURNED TO PRODUCTION AND COMMINGLED ON 7/18/2011.

This formation is commingled with another formation: Yes No

Test Information:

Date: 07/23/2011 Hours: 24 Bbls oil: 7 Mcf Gas: 204 Bbls H2O: 14

Calculated 24 hour rate: _____ Bbls oil: 7 Mcf Gas: 204 Bbls H2O: 14 GOR: _____

Test Method: FLOWING Casing PSI: 561 Tubing PSI: 340 Choke Size: 12/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 59

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7218 Tbg setting date: 07/16/2011 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: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 06/29/2011 Date of First Production this formation: _____

Perforations Top: 7014 Bottom: 7264 No. Holes: 280 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

NIOBRARA REFRAC 7014'-7044' FRAC'D W/98,100# SAND IN 130,158 GAL FRAC FLUID 06/29/2011. CODELL REFRAC 7244'-7264' FRAC'D W/181,081# SAND IN 105,378 GAL FRAC FLUID 06/29/11.

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: _____

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

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

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

Signed: _____ Print Name: JANE WASHBURN

Attachment Check List

Att Doc Num	Name
2286025	FORM 5A SUBMITTED
2286026	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)