

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:  
400247287

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: Marina Ayala  
Phone: (720) 876-5905  
Fax: (720) 876-6905

5. API Number 05-077-10112-00  
6. County: MESA  
7. Well Name: ORCHARD UNIT  
Well Number: 18-15H (K20OU)  
8. Location: QtrQtr: NESW Section: 20 Township: 8S Range: 96W Meridian: 6  
Footage at surface: Distance: 1399 feet Direction: FSL Distance: 1686 feet Direction: FWL  
As Drilled Latitude: 39.331914 As Drilled Longitude: -108.135201

GPS Data:

Data of Measurement: 09/27/2011 PDOP Reading: 2.2 GPS Instrument Operator's Name: Brandon Birdsall

\*\* If directional footage at Top of Prod. Zone Dist.: 1217 feet. Direction: FSL Dist.: 169 feet. Direction: FWL  
Sec: 20 Twp: 8S Rng: 96W

\*\* If directional footage at Bottom Hole Dist.: 642 feet. Direction: FSL Dist.: 1870 feet. Direction: FEL  
Sec: 18 Twp: 8S Rng: 96W

9. Field Name: GRAND VALLEY 10. Field Number: 31290  
11. Federal, Indian or State Lease Number: COC58675

12. Spud Date: (when the 1st bit hit the dirt) 02/13/2011 13. Date TD: 07/01/2011 14. Date Casing Set or D&A: 07/02/2011

15. Well Classification:

Dry  Oil  Gas/Coalbed  Disposal  Stratigraphic  Enhanced Recovery  Storage  Observation

16. Total Depth MD 13853 TVD\*\* 8684 17 Plug Back Total Depth MD 13740 TVD\*\* 8571

18. Elevations GR 5927 KB 5949

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 (same log included in Neutron) 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	40	40	0	40	CALC
SURF	14+3/4	10+3/4	40.50	0	1,535	854	0	1,570	CALC
1ST	9+7/8	7+5/8	26.40	0	7,560	681	3,550	7,560	CALC
2ND	6+3/4	5	23.20	0	13,833	663	4,120	13,853	CBL

### STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: \_\_\_\_\_

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
DV TOOL	1ST	3,099	363	1,740	3,550

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	
ROLLINS	4,961	5,230	<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	5,231	5,459	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
CORCORAN	5,460	6,814	<input type="checkbox"/>	<input type="checkbox"/>	
CASTLEGATE	6,815	7,562	<input type="checkbox"/>	<input type="checkbox"/>	
MANCOS	7,563	8,558	<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	8,559	13,853	<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: Marina Ayala

Title: Permitting Technician Date: \_\_\_\_\_ Email: marina.ayala@encana.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
400247340	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400247339	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 checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400247305	LAS-NEUTRON	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400247313	PDF-MUD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400247314	PDF-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

**User Group**

**Comment**

**Comment Date**

User Group	Comment	Comment Date

Total: 0 comment(s)