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: 400246130

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 05-045-19028-00
6. County: GARFIELD
7. Well Name: N. PARACHUTE
Well Number: WF04A-35H26596
8. Location: QtrQtr: SENE Section: 26 Township: 5S Range: 96W Meridian: 6
9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING

Treatment Date: 12/12/2011 Date of First Production this formation: 12/30/2011

Perforations Top: 6818 Bottom: 10109 No. Holes: 330 Hole size: 0.42

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

Stages 1-11 treated with a total of: 96,556 bbls of Slickwater.

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

Test Information:

Date: 01/05/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 3244 Bbls H2O: 101

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 3244 Bbls H2O: 101 GOR: 0

Test Method: Flowing Casing PSI: 1305 Tubing PSI: 257 Choke Size: 42/64

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

Tubing Size: 2 + 3/8 Tubing Setting Depth: 10108 Tbg setting date: 01/25/2012 Packer Depth: 0

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: Marina Ayala

Title: Permitting Technician Date: 1/27/2012 Email: marina.ayala@encana.com

Attachment Check List

Att Doc Num	Name
400246130	FORM 5A SUBMITTED
400246147	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date
Permit	off hold; form 5 approved.	2/6/2012 11:17:28 AM
Permit	on hold pending approval of form 5	1/27/2012 2:48:50 PM

Total: 2 comment(s)