

FORMATION: J-NIOBRARA-CODELL

Status: COMMINGLED

Treatment Date: _____ Date of First Production this formation: 12/16/2011

Perforations Top: 7425 Bottom: 8170 No. Holes: 172 Hole size: 0.42

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

Set CBP @ 7360'. 01-29-12. Drilled out CBP @ 7360', CFP @ 7490'. 01-30-12.
Drilled out CFP @ 7740' to commingle the JSND-NBRR-CDL. 01-31-12

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/04/2012 Hours: 24 Bbls oil: 58 Mcf Gas: 118 Bbls H2O: 35

Calculated 24 hour rate: _____ Bbls oil: 58 Mcf Gas: 118 Bbls H2O: 35 GOR: 2034

Test Method: FLOWING Casing PSI: 1363 Tubing PSI: 412 Choke Size: 12/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1250 API Gravity Oil: 50

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8079 Tbg setting date: 01/31/2012 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: J SAND

Status: PRODUCING

Treatment Date: 11/06/2011 Date of First Production this formation: 12/16/2011

Perforations Top: 8115 Bottom: 8170 No. Holes: 42 Hole size: 0.42

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

Frac'd the J-Sand 8115'- 8170', (42 holes) w/ 64,176 gal 18 # pHaserFrac Hybrid
cross linked gel containing 250,620# 20/40 Sand. 11-06-11

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: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 11/06/2011 Date of First Production this formation: 12/16/2011

Perforations Top: 7425 Bottom: 7681 No. Holes: 130 Hole size: 0.42

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

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

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA Status: COMMINGLED

Treatment Date: 11/06/2011 Date of First Production this formation: 12/16/2011

Perforations Top: 7425 Bottom: 7447 No. Holes: 88 Hole size: 0.42

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

Set CFP @ 7490'. 11-06-11
Frac'd the Niobrara 7425' - 7447' (88 holes), w/ 98,868 gals 18 # pHaserFrac Hybrid cross linked gel containing 250,220# 30/50 sand. 11-06-11

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: Sheilla Reed-High

Title: Drilling and Compl. Tech. Date: _____ Email: sheilla.reedhigh@Encana.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400253409	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)