

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:

400251843

Date Received:

02/14/2012

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

5. API Number 05-123-17811-00 6. County: WELD  
7. Well Name: DINNER Well Number: 14-A-2  
8. Location: QtrQtr: SESE Section: 14 Township: 4N Range: 66W Meridian: 6  
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 10/20/2011 Date of First Production this formation: 02/18/1994

Perforations Top: 7206 Bottom: 7224 No. Holes: 144 Hole size:

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

Frac'd 7206-7224 w/114,244 gal frac fluid and 251,180 # sand.  
CIBP set @ 7250 on 10/18/11 and sand plug pumped @ 7220 on 10/20/11.

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:



### Attachment Check List

Att Doc Num	Name
400251843	FORM 5A SUBMITTED
400252043	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Added date of first production as per opr.	4/18/2012 1:42:55 PM

Total: 1 comment(s)