

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

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SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form). Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 100185	4. Contact Name: Julia M. Carter
2. Name of Operator: Encana Oil & Gas (USA) Inc.	Phone: 720.876.5240
3. Address: 370 17th Street Suite 1700	Fax: 720.876.5240
City: Denver State: CO Zip: 80202	
5. API Number: 05-045-21395	OGCC Facility ID Number: 1C-15 G15 7101
6. Well/Facility Name: Albertson DHS	7. Well/Facility Number: 1C-15 G15 7101
8. Location (Qtr/Sec, Twp, Rng, Meridian): SWNE Sec 15 T7S-R101W, 6th PM	Surface Eqpmt Diagram
9. County: Garfield	10. Field Name: Mesagar
11. Federal, Indian or State Lease Number:	Technical Info Page: X
	Other

Complete the Attachment
Checklist

OP OGCC



General Notice

<input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)	
Change of Surface Footage from Exterior Section Lines:	<input type="checkbox"/> FNUFSL <input type="checkbox"/> FEUFWL
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/> attach directional survey
Bottomhole location Qtr/Sec, Twp, Rng, Mer	
Latitude	Distance to nearest property line
Longitude	Distance to nearest bldg, public rd, utility or RR
Ground Elevation	Distance to nearest lease line
	Is location in a High Density Area (rule 603b)? Yes/No <input type="checkbox"/> NO
	Distance to nearest well same formation
	Surface owner consultation date: NA
GPS DATA:	
Date of Measurement PDOP Reading Instrument Operator's Name	
<input type="checkbox"/> CHANGE SPACING UNIT	
Formation	Formation Code
Spacing order number	Unit acreage
Unit configuration	
<input type="checkbox"/> Remove from surface bond	
Signed surface use agreement attached	
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	
Effective Date:	
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	
<input type="checkbox"/> CHANGE WELL NAME	
From:	
To:	
Effective Date:	
<input type="checkbox"/> ABANDONED LOCATION:	
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Ready for inspection:	
<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS	
Date well shut in or temporarily abandoned:	
Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No	
MIT required if shut in longer than two years. Date of last MIT	
<input type="checkbox"/> SPUD DATE:	
<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)	
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	
*submit cbl and cement job summaries	
Method used	Cementing tool setting/perf depth
Cement volume	Cement top
Cement bottom	Date
<input type="checkbox"/> RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.	
Final reclamation will commence on approximately	
<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.	

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	
Approximate Start Date:	
<input type="checkbox"/> Report of Work Done	
Date Work Completed:	
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Waive CBL
<input type="checkbox"/> E&P Waste Disposal	
<input type="checkbox"/> Beneficial Reuse of E&P Waste	
<input type="checkbox"/> Status Update/Change of Remediation Plans	
for Spills and Releases	

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

Signed: Julia M. Carter Date: 4/23/12 Email: julia.carter@encana.com
Print Name: Julia M. Carter Title: Regulatory AnalystCOGCC Approved: [Signature] Date: 4/23/12
CONDITIONS OF APPROVAL, IF ANY: NWAE



Page 2

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1 OGCC Operator Number: 100185 API Number: 05-045-21395
2 Name of Operator: Encana Oil & Gas (USA) Inc. OGCC Facility ID #
3 Well/Facility Name: Albertson DHS Well/Facility Number 1C-15 G15 7101
4 Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNE Sec 15 T7S, R101W, 6th PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed
This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1

RECEIVED

APR 23 2012

COGCC/Rifle Office

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DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Encana requests approval to forego a CBL for intermediate casing (as required by COA) as cement was run to surface.