

FORM  
5A

Rev  
02/08

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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Date Received:

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 05-123-22523-00

6. County: WELD

7. Well Name: JACK NOEL

Well Number: 1-18

8. Location: QtrQtr: SWNE Section: 18 Township: 4N Range: 65W Meridian: 6

9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: GREENHORN

Status: TEMPORARILY ABANDONED

Treatment Date: Date of First Production this formation: 03/15/2005

Perforations Top: 7330 Bottom: 7360 No. Holes: 120 Hole size:

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:

Greenhorn is TA to test the Niobrara-Codell.

Date formation Abandoned: 01/06/2012 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

Bridge Plug Depth: 7210 Sacks cement on top:

FORMATION: J SAND Status: TEMPORARILY ABANDONED

Treatment Date: \_\_\_\_\_ Date of First Production this formation: 03/15/2005

Perforations Top: 7626 Bottom: 7662 No. Holes: 72 Hole size: \_\_\_\_\_

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: \_\_\_\_\_

J Sand is TA to test the Niobrara-Codell.

Date formation Abandoned: 01/06/2012 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt \_\_\_\_\_

Bridge Plug Depth: 7210 Sacks cement on top: \_\_\_\_\_

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 01/06/2012 Date of First Production this formation: 03/15/2005

Perforations Top: 6868 Bottom: 7162 No. Holes: 256 Hole size: \_\_\_\_\_

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

Niobrara - Frac'd 6848 – 6980' with 159,172 gal frac fluid and 250,080 # sand (01/06/12)

Codell - Frac'd 7148' – 7162 with 121,955 gal frac fluid with 250,080# sand (01-06-12)

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

**Test Information:**

Date: 02/25/2012 Hours: 10 Bbls oil: 6 Mcf Gas: 118 Bbls H2O: 3

Calculated 24 hour rate: \_\_\_\_\_ Bbls oil: 14 Mcf Gas: 283 Bbls H2O: 7 GOR: 20214

Test Method: FLOW Casing PSI: 541 Tubing PSI: 490 Choke Size: 24/24

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1 API Gravity Oil: 63

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7125 Tbg setting date: 02/18/2012 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: \_\_\_\_\_

Comment: \_\_\_\_\_

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

Signed: \_\_\_\_\_ Print Name: Jane Washburn

Title: Operations Technologist Date: \_\_\_\_\_ Email jane.washburn@encana.com

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### Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

### General Comments

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

Total: 0 comment(s)