

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

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Table with 4 columns: DE, ET, OE, ES

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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
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) 876-4905

5. API Number 05-045-20654-00
6. County: GARFIELD
7. Well Name: Federal
Well Number: 25-4A (PE-25)
8. Location: QtrQtr: SWNW Section: 25 Township: 7S Range: 96W Meridian: 6
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING
Treatment Date: 04/15/2012 Date of First Production this formation: 04/30/2012
Perforations Top: 4172 Bottom: 6081 No. Holes: 189 Hole size: 0.34
Provide a brief summary of the formation treatment: Open Hole: [ ]
Stages 1-7 treated with a total of: 66,688 bbls of Slickwater.
This formation is commingled with another formation: [ ] Yes [X] No
Test Information:
Date: 05/08/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 745 Bbls H2O: 438
Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 745 Bbls H2O: 438 GOR: 0
Test Method: Flowing Casing PSI: 1700 Tubing PSI: 660 Choke Size: 28/64
Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1170 API Gravity Oil: 0
Tubing Size: 2 + 3/8 Tubing Setting Depth: 5493 Tbg setting date: 05/04/2012 Packer Depth: 5001
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: Email marina.ayala@encana.com

### Attachment Check List

Att Doc Num	Name
400284840	WELLBORE DIAGRAM

Total Attach: 1 Files

#### General Comments

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

Total: 0 comment(s)