

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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Document Number:

400275117

Date Received:

04/21/2012

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
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: Sheilla Reed-High
Phone: (720) 876-3678
Fax: (720) 876-4678

5. API Number 05-123-32225-00
6. County: WELD
7. Well Name: MARTINSON
Well Number: 2-8-24
8. Location: QtrQtr: SWSW Section: 24 Township: 4N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED

Treatment Date: 01/24/2012 Date of First Production this formation: _____

Perforations Top: 7363 Bottom: 7380 No. Holes: 34 Hole size: 0.42

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

Set CFP @ 7420'. 01-23-12
Frac'd the Codell with 250,400 20/40 Sand with 81,396 gals SLF. 01-24-12

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: J-NIOBRARA-CODELLStatus: COMMINGLEDTreatment Date: 01/24/2012

Date of First Production this formation: _____

Perforations Top: 7065 Bottom: _____ No. Holes: 182 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Set CBP @ 6950'. 03-07-12

Drilled out CBP @ 6950', CFP @ 7130', CFP @ 7420' to commingle the JSND-NBRR-CDL. 03-07-12

This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**Date: 03/20/2012 Hours: 24 Bbls oil: 90 Mcf Gas: 796 Bbls H2O: 40Calculated 24 hour rate: Bbls oil: 90 Mcf Gas: 796 Bbls H2O: 40 GOR: 8844Test Method: FLOWING Casing PSI: 796 Tubing PSI: 589 Choke Size: 16/64Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1169 API Gravity Oil: _____Tubing Size: 2 + 3/8 Tubing Setting Depth: 7060 Tbg setting date: 03/08/2012 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 SANDStatus: PRODUCINGTreatment Date: 01/21/2012

Date of First Production this formation: _____

Perforations Top: 7843 Bottom: 7891 No. Holes: 76 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Frac'd the J-Sand 7843'-7891', (76 holes) w/ 66,654 gal 18 # FlexD

Hybrid cross linked gel containing 250,000 # 20/40 Sand. 01-21-12

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: 01/24/2012 Date of First Production this formation: _____
Perforations Top: 7065 Bottom: 7380 No. Holes: 106 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: 01/24/2012 Date of First Production this formation: _____
Perforations Top: 7065 Bottom: 7083 No. Holes: 72 Hole size: 0.42

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

Set CFP @ 7130'. 01-24-12
Frac'd the Niobrara 7065' – 7083' (72 holes), w/ 99,330 gals 18 # FlexD Hybrid
cross linked gel containing 252,870 # 20/40 sand. 01-24-12

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: _____

API Gravity Oil - N/A

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: 4/21/2012 Email: sheilla.reedhigh@Encana.com

Attachment Check List

Att Doc Num	Name
400275117	FORM 5A SUBMITTED
400275118	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Logs recieved	5/30/2012 8:14:28 AM
Permit	On hold for logs.	5/23/2012 3:59:28 PM

Total: 2 comment(s)