

FORM
5
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:
2287118

Date Received:
01/23/2012

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type Final completion Preliminary completion

1. OGCC Operator Number: 100185 4. Contact Name: SHEILLA REED-HIGH
2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3678
3. Address: 370 17TH ST STE 1700 Fax: (720) 876-4678
City: DENVER State: CO Zip: 80202-

5. API Number 05-123-32565-00 6. County: WELD
7. Well Name: JILLSON Well Number: 4-8-22
8. Location: QtrQtr: SESW Section: 22 Township: 2N Range: 68W Meridian: 6
Footage at surface: Distance: 953 feet Direction: FSL Distance: 1675 feet Direction: FWL
As Drilled Latitude: 40.119496 As Drilled Longitude: -104.992807

GPS Data:
Date of Measurement: 01/05/2012 PDOP Reading: 2.7 GPS Instrument Operator's Name: PAT LINDERHOLM

** If directional footage at Top of Prod. Zone Dist.: 160 feet. Direction: FSL Dist.: 2536 feet. Direction: FWL

Sec: 22 Twp: 2N Rng: 68W

** If directional footage at Bottom Hole Dist.: 168 feet. Direction: FSL Dist.: 2539 feet. Direction: FWL

Sec: 22 Twp: 2N Rng: 68W

9. Field Name: WATTENBERG 10. Field Number: 90750

11. Federal, Indian or State Lease Number: _____

12. Spud Date: (when the 1st bit hit the dirt) 11/09/2011 13. Date TD: 11/12/2011 14. Date Casing Set or D&A: 11/13/2011

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 8335 TVD** 8166 17 Plug Back Total Depth MD 8273 TVD** 8104

18. Elevations GR 4968 KB 4981 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:
CBL, DUAL IND/COMPENSATED DENSITY/COMPENSATED NEUTRON

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8		0	754	290	0	754	CALC
1ST	7+7/8	4+1/2		0	8,323	700	3,060	8,323	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
SUSSEX	4,484		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,460		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,744		<input type="checkbox"/>	<input type="checkbox"/>	
J SAND	8,170		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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 & COMP. TECH Date: 1/6/2012 Email: SHEILLA.REEDHIGH@ENCANA.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
2287120	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2287119	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
2287118	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400283149	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	Received and attached Directional Drilling Template.	5/9/2012 4:24:31 PM
Permit	ON HOLD: requesting Directional Drilling Template.	5/3/2012 2:51:07 PM

Total: 2 comment(s)