

FORM
5A

Rev
06/12

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:

400263383

Date Received:

03/21/2012

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: <u>100185</u>	4. Contact Name: <u>Jane Washburn</u>
2. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-5431</u>
3. Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-6431</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-</u>	

5. API Number <u>05-123-22522-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>JACK NOEL</u>	Well Number: <u>5-2-18</u>
8. Location: QtrQtr: <u>SWNE</u> Section: <u>18</u> Township: <u>4N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: 01/03/2012 End Date: _____ Date of First Production this formation: _____

Perforations Top: 6913 Bottom: 7226 No. Holes: 224 Hole size: _____

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

Frac'd the Niobrara (6913' – 7036') w/ 179,966 gal frac fluid and 250,220# sand (01-03-12)
Frac'd the Codell (7210' – 7226') with 119,965 gal frac fluid and 250,600# sand. (01-03-12)
CBP set @ 7090' on 1-3-12; drilled out on 2-16-2012. CIBP set @ 7280' on 1/3/2012.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): _____ Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Number of staged intervals: _____

Total acid used in treatment (bbl): _____ Max frac gradient (psi/ft): _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____

Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/25/2012 Hours: 14 Bbl oil: 14 Mcf Gas: 282 Bbl H2O: 7

Calculated 24 hour rate: Bbl oil: 24 Mcf Gas: 483 Bbl H2O: 12 GOR: 20125

Test Method: Flow Casing PSI: 420 Tubing PSI: 204 Choke Size: 0

Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1 API Gravity Oil: 62

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7180 Tbg setting date: 02/16/2012 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: 3/21/2012 Email jane.washburn@encana.com

Attachment Check List

Att Doc Num	Name
400263383	FORM 5A SUBMITTED
400263447	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)