

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400263813

Date Received:

03/27/2012

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	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 05-123-24261-00	6. County: WELD
7. Well Name: KIYOTA	Well Number: 6-8-35
8. Location: QtrQtr: SWSE Section: 35 Township: 3N Range: 67W Meridian: 6	
9. Field Name: WATTENBERG	Field Code: 90750

Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED Treatment Type: _____
Treatment Date: 01/04/2012 End Date: _____ Date of First Production this formation: _____
Perforations Top: 7874 Bottom: 7924 No. Holes: 100 Hole size: _____
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

CIBP's set @ 7490' and 7520' on 1/4/2012.

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: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____
Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl 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 plugged back to test the Niobrara Codell following a refrac.

Date formation Abandoned: 01/04/2012 Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: 7490 Sacks cement on top: _____

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____
Treatment Date: 01/04/2012 End Date: _____ Date of First Production this formation: _____
Perforations Top: 7220 Bottom: 7456 No. Holes: 120 Hole size: _____
Provide a brief summary of the formation treatment: _____ Open Hole: ☐

Niobrara Refrac: Frac'd 7220-7236 with 136,681 gal frac fluid and 250,640 # sand.
Codell Refrac: Frac'd 7436-7456 with 126,916 gal frac fluid and 250,320 # sand.
Set CIBP's @ 7520' and 7490' on 1/4/12. Set CFP @ 7290' on 1/4/12 and drilled out on 1/27/12.

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: 02/03/2012 Hours: 14 Bbl oil: 19 Mcf Gas: 206 Bbl H2O: 18
Calculated 24 hour rate: Bbl oil: 34 Mcf Gas: 366 Bbl H2O: 32 GOR: 10764
Test Method: Flowing Casing PSI: 527 Tubing PSI: 398 Choke Size: 40/64
Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1140 API Gravity Oil: 54
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7424 Tbg setting date: 01/27/2012 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: 3/27/2012 Email: jane.washburn@encana.com
:

Attachment Check List

Att Doc Num	Name
400263813	FORM 5A SUBMITTED
400265159	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)