

FORM  
5ARev  
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:

400275827

Date Received:

04/24/2012

## 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: Marina Ayala  
 2. Name of Operator: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5905  
 3. Address: 370 17TH ST STE 1700 Fax: (720) 876-6905  
 City: DENVER State: CO Zip: 80202-

5. API Number 05-045-19852-00 6. County: GARFIELD  
 7. Well Name: SGU Well Number: 8511A-36 B36496  
 8. Location: QtrQtr: Lot 2 Section: 36 Township: 4S Range: 96W Meridian: 6  
 9. Field Name: WILDCAT Field Code: 99999

## Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type: \_\_\_\_\_  
 Treatment Date: 02/27/2012 End Date: \_\_\_\_\_ Date of First Production this formation: 04/11/2012  
 Perforations Top: 8438 Bottom: 12182 No. Holes: 420 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐

Stages 1-14 treated with a total of: 129,689 bbls of Slickwater.

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](http://FracFocus.org)

## Test Information:

Date: 04/20/2012 Hours: 24 Bbl oil: 0 Mcf Gas: 4705 Bbl H2O: 87  
 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 4705 Bbl H2O: 87 GOR: 0  
 Test Method: Flowing Casing PSI: 2930 Tubing PSI: 726 Choke Size: 64/64  
 Gas Disposition: SOLD Gas Type: DRY Btu Gas: 1170 API Gravity Oil: 0  
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 12173 Tbg setting date: 03/23/2012 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:

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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: 4/24/2012 Email marina.ayala@encana.com  
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### **Attachment Check List**

| Att Doc Num | Name              |
|-------------|-------------------|
| 400275827   | FORM 5A SUBMITTED |
| 400275838   | WELLBORE DIAGRAM  |

Total Attach: 2 Files

### **General Comments**

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)