

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

Document Number: 400279833

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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: RUTHANN MORSS
Phone: (720) 876-5060
Fax: (720) 876-6060

5. API Number 05-045-10753-00
6. County: GARFIELD
7. Well Name: FEDERAL
Well Number: 29-3 (PF29)
8. Location: QtrQtr: SENW Section: 29 Township: 7S Range: 95W Meridian: 6
9. Field Name: PARACHUTE Field Code: 67350

Completed Interval

FORMATION: WILLIAMS FORK Status: TEMPORARILY ABANDONED Treatment Type:

Treatment Date: 04/10/2012 End Date: Date of First Production this formation: 11/02/2005

Perforations Top: 5015 Bottom: 6812 No. Holes: 110 Hole size: 34/100

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

CBP SET AT 4910', TESTED TO 1500 PSI

This formation is commingled with another formation: [ ] Yes [X] No

Total fluid used in treatment (bbl):
Total gas used in treatment (mcf):
Type of gas used in treatment:
Total acid used in treatment (bbl):
Recycled water used in treatment (bbl):
Fresh water used in treatment (bbl):
Total proppant used (lbs):
Max pressure during treatment (psi):
Fluid density at initial fracture (lbs/gal):
Min frac gradient (psi/ft):
Number of staged intervals:
Flowback volume recovered (bbl):
Disposition method for flowback:
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: DRILLING ADDITIONAL WELLS ON PAD

Date formation Abandoned: 04/10/2012 Squeeze: [ ] Yes [X] No If yes, number of sacks cmt

\*\* Bridge Plug Depth: 4910 \*\* Sacks cement on top: 2 \*\* Wireline and Cement Job Summary must be attached.

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: RUTHANN MORSS  
Title: REGULATORY ANALYST Date: 5/2/2012 Email RUTHANN.MORSS@ENCANA.COM  
:

### **Attachment Check List**

| Att Doc Num | Name                 |
|-------------|----------------------|
| 1533722     | WIRELINE JOB SUMMARY |
| 400279833   | FORM 5A SUBMITTED    |
| 400279834   | WELLBORE DIAGRAM     |

Total Attach: 3 Files

### **General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b>                      | <b><u>Comment Date</u></b> |
|--------------------------|--------------------------------------------|----------------------------|
| Permit                   | off hold; attached wireline tkt.           | 9/28/2012<br>7:33:53 AM    |
| Permit                   | On hold requested cement/wireline tickets. | 6/22/2012<br>9:50:34 AM    |

Total: 2 comment(s)