

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: 400195694 Date Received: 08/17/2011

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: Marina Ayala Phone: (720) 876-5905 Fax: (720) 876-4905

5. API Number 05-045-18700-00 6. County: GARFIELD 7. Well Name: N. Parachute 8. Location: QtrQtr: SENE Section: 17 Township: 6S Range: 96W Meridian: 6 9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: WILLIAMS FORK Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 06/03/2011 End Date: Date of First Production this formation: 06/14/2011 Perforations Top: 4560 Bottom: 7694 No. Holes: 300 Hole size: 42/100

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

Stges 1-10 treated with a total of: 123,314 bbls of Slickwater/

This formation is commingled with another formation: [ ] Yes [X] 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: Min frac gradient (psi/ft): Total acid used in treatment (bbl): Number of staged intervals: 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: 06/21/2011 Hours: 24 Bbl oil: 0 Mcf Gas: 1773 Bbl H2O: 114 Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 1773 Bbl H2O: 114 GOR: 0 Test Method: Flowing Casing PSI: 1745 Tubing PSI: 723 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: 6612 Tbg setting date: 06/12/2011 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: \*\* 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: Marina Ayala

Title: Permitting Technician Date: 8/17/2011 Email marina.ayala@encana.com  
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**Attachment Check List**

Att Doc Num	Name
400195694	FORM 5A SUBMITTED
400196776	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	form 5 approved.	1/15/2013 11:49:39 AM
Permit	Waiting on logs for form 5	8/17/2011 4:14:19 PM

Total: 2 comment(s)